



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5

77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

RECEIVED APR 22 1993
WMD RCRA
RECORD CENTER *Compliance*

APR 20 1993

REPLY TO THE ATTENTION OF:

HRE-8J

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Henry Lopes
Techalloy Company, Inc.
370 Franklin Turnpike
Mahwah, New Jersey 07430

Re: Private Well Sampling Plan (PWSP)
Techalloy Company, Inc.
ILD 005 178 975

Dear Mr. Lopes:

The United States Environmental Protection Agency (U.S. EPA) has reviewed the "Private Well Sampling Plan (PWSP) - February 1993" which was submitted pursuant to the Administrative Order On Consent (AOC), Docket NO. V-W 007-93. Due to significant deficiencies, the PWSP dated February 1993 is disapproved by U.S. EPA. To obtain U.S. EPA's approval, it is recommended that the revisions as noted in Attachment I be incorporated in a revised plan. Pursuant to Section VI.H of the AOC, Respondent has thirty (30) days from its receipt of this letter to submit the revised PWSP to U.S. EPA.

The most significant deficiency of the PWSP is the omission of the attestation required in Section VI.A.1 of the AOC. This Section specifies that the PWSP include an attestation by the Respondent that the list of properties with water wells is complete and up to date. It is critical that all residential wells in the potential area of contamination be identified. Pursuant to Section VI.A.1 of the AOC, it is Respondent's responsibility to assure all such wells are identified.

To expedite the sampling program, a complete Quality Assurance Project Plan (QAPjP) does not have to be included in the PWSP. Instead, the appropriate quality assurance information pertaining to the PWSP should be included in the QAPjP portion of the RCRA Facility Investigation Work Plan.

If you have any questions please call Mr. William Buller of my staff at (312) 886-4568.

Sincerely yours

Joseph M. Boyle
Joseph M. Boyle, Chief
RCRA Enforcement Branch

cc: Kevin Lesko, IEPA
Carlos Sernas, Weston

ATTACHMENT I
COMMENTS ON PRIVATE WELL SAMPLING PLAN - FEBRUARY 1993

Section 1-3. Show the locations of the wells listed in tables 1-1 through 1-4 on a scaled map.

For the wells listed in tables 1-1 through 1-4 provide the following additional information: compounds analyzed, analytical test methods used and detection limits, sampling and preservation procedures.

Section 2.1. Provide attestation as required in Section VI.A.1. of the AOC. The attestation shall cover the area of potential contamination and include a map which shows all private wells within the potential area of contamination.

The well sampling area should be delineated with boundaries that completely enclose the area and include all critical wells. The property at Non-responsive Non-responsive should be included.

Section 2.3. Hydrochloric acid is proposed for volatile organic compounds (VOCs) sample preservation. This method of preservation is not recommended in "RCRA Groundwater Monitoring Technical Enforcement Guidance Document U.S. EPA - September 1986". Provide appropriate reference for this method of sample preservation or follow the above U.S. EPA guidance document.

Section 2.5. This paragraph should include the statement that analysis of private well samples will include all VOCs of Table 2-2.

Analytical methods for VOCs shall be those approved by U.S. EPA and which have detection limits equal to or below the Maximum Contaminant Level specified by U.S. EPA, or the concentration level established by the criteria given in Section VI. A.2. of the AOC.

The following inorganic analytes shall be included in the sample analysis: nickel, copper, lead, chromium, cadmium, arsenic, mercury, barium, cyanide, sulfate, and nitrate. Include a table which presents the analytical and preservation methods to be employed for all analytes.

Provide groundwater analytical data (with appropriate quality assurance) or rationale to justify exclusion of the 40 CFR 264 Appendix IX parameters not listed in Table 2-2.

Section 2.6 Identify laboratory(s) to be used for analyses of samples.

Section 3.1 Omit this section: the schedule and dictates stated in Section VI.2. and 3. of the AOC shall be followed.

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asimpkins:WBuller:04/13/93:disk #2 Filename:techallo.pws

OFFICIAL FILE COPY

SIGNATURE/INITIAL CONCURRENCE REQUESTED - RCRA ENFORCEMENT BRANCH (REB)									
TYP.	AUTH	IL/IN TES CHIEF	MI/WI TES CHIEF	MN/OH TES CHIEF	IL/MI/WI EPS CHIEF	IN/MN/OH EPS CHIEF	REB BRANCH CHIEF	RCRA ASSOC. DIR.	WMD DIV. DIR.
WB	WB 4/13/93	CS 4/14					WB 4/19/93		



Hydrology Division

2204 Griffith Drive
Champaign, Illinois 61820-7495
Telephone (217) 333-4300
Telefax (217) 333-6540

January 15, 1993

Ms. Tracie Harding
Roy F. Weston Corporation
3 Hawthorne Parkway - Suite 400
Vernon Hills, Illinois 60061

Dear Ms. Harding:

As you requested during our telephone conversation on January 14, we are enclosing the computer printouts for private well and municipal well information located in Section 4 of Township 43N., Range 6E., and Section 33 of Township 44N., Range 6E., all in McHenry County.

No available information is indicated on the printout by the statement "0 records were found for the specified locations." Also enclosed are explanations of the Illinois State Water Survey Private Well Database and the PICS (Public, Industrial, Commercial Survey) Database.

The data included in the computerized database (the Private Well Inventory Database) are those non-municipal wells which are known to the Illinois State Water Survey, and the PICS database is an inventory of municipal well information and large industrial ground-water users. We may not have a paper copy of well records for these ground-water users.

The invoice accompanying this request covers the \$5.00 query fee for private well information and \$5.00 query fee for municipal information plus \$0.10 per page for 7 pages, totalling \$10.70.

If you have any questions or if we can be of further assistance, please call.

Sincerely,

Susie Dodd
Assistant Supportive Scientist
Office of Ground-Water Information
Phone: (217) 333-9043

sd/law

Enclosures as stated

PRIVATE WELL DATA BASE

McHenry County, Illinois

Section 4, Township 43N, Range 6E

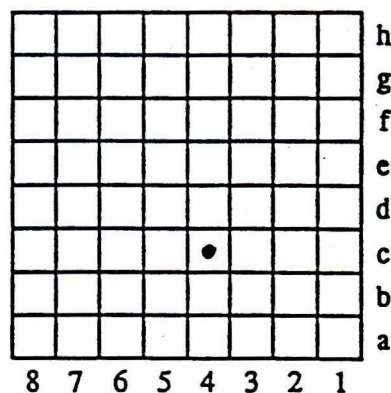
Section 33 , Township 44N, Range 6

ISWS 10-ACRE PLOT LOCATION SYSTEM

The following is an explanation of the ISWS Private Well Database location system.

The location system uses the Township, Range, and Section. The location consists of five parts: County, Township, Range, Section and coordinate within the section (subsection or 10-acre plot). Sections are divided into rows of $\frac{1}{8}$ mile squares. Each $\frac{1}{8}$ mile square contains 10 acres and corresponds to a quarter of a quarter of a quarter section. A normal section of 1 square mile contains 8 rows of $\frac{1}{8}$ mile squares: an odd-sized section contains more or fewer rows. Rows are numbered from east to west and lettered from south to north as shown in the diagram.

Example: St. Clair County FIP No. 163
T.2N., R.10W
Section 23



The location of the well shown above is 163 2N10W-23.4c. The well point is located at the center of this 10-acre plot.

ILLINOIS STATE WATER SURVEY
PRIVATE WELL DATABASE EXPLANATION

TWN
RNG
SC
PL
OWNER
DRILLER
DATE
PERMIT

TOWNSHIP
RANGE
SECTION
PLOT LOCATION
WELL OWNER
WELL DRILLING CONTRACTOR OF WELL
DATE INITIALLY DRILLED
PERMIT CODE LETTER INDICATED AGENCY
WHICH ISSUED PERMIT #
M - MINES AND MINERALS (After 1988 Only
Observation Wells And Irrigation Wells)
P - PUBLIC HEALTH (All Non-Community
Supplies)
E - EPA (Community Supplies)
N - NO FEE
X - UNDETERMINED

DEPTH
REC

DEPTH (Well To Nearest Ft)
RECORD TYPE (Indicated Paper Source That
Documents The Well Exists, Since
Records Were Collected Before Well
Log Submittal Was Required)
L - LOG
A - AFFIDAVIT
C - CHEMICAL ANALYSIS
I - INVENTORY
X - INDICATES COMMENT IN OWNERS FIELD
SOMETHING UNUSUAL

US

WELL USE - A TWO LETTER CODE INDICATING
THE USAGE OF THE WELL
CM - COMMERCIAL
CO - CONSERVATION
DO - DOMESTIC
IN - INDUSTRIAL
IR - IRRIGATION
MO - MONITORING
MU - MUNICIPAL
NC - NON-COMMUNITY
OB - OBSERVATION
PK - PARK
SC - SCHOOL
ST - STATE

TY

WELL TYPE (A Two Letter Code Indicating The Type
of Well)

BLANK - ASSUMED DRILLED

BO - BORED AND DUG

DU - DUG (Being Phased Out)

DR - DRIVEN

SP - SAND POINT

SG - SPRING

AQ

AQUIFER TYPE (A Two Letter Code Indicating
Aquifer Type)

BR - BEDROCK

UN - UNCONSOLIDATED

THE DATA IN THE PRIVATE WELL INVENTORY DATABASE IS A LISTING OF THE NON-MUNICIPAL WELLS WHICH ARE KNOWN TO THE ILLINOIS STATE WATER SURVEY (ISWS). THIS INFORMATION HAS BEEN ENTERED VERBATIM FROM WELL LOGS SUMMITTED BY THE DRILLER, FROM CHEMICAL ANALYSIS REPORTS, FROM WELL SEALING FORMS, OR WELL INVENTORY FORMS FROM THE 1930-34 WELL SURVEY AND OTHER SPECIAL PROJECTS. THE ACCURACY OF THIS DATA IS CONTROLLED BY THOSE WHO SUBMITTED THE FORM. INFORMATION IN THE PRIVATE WELL DATABASE HAS NOT BEEN VERIFIED.

ILLINOIS STATE WATER SURVEY PICS DATABASE EXPLANATION

SWS id	ISWS facility id number
Name	Facility name
Well no	ISWS point source number
Stat	Point source status
	A - Abandoned
	C - Capped
	D - Disconnected
	E - Emergency
	I - In Use
	O - Observation
	S - Sealed
	U - Unused
Locat	County, Township, Range, Section, 10-Acre plot
Dpth	Depth (well to nearest ft)
Foot	Footage from Township section corner
Init date	Date drilled
Driller	Well drilling contractor of well

DESCRIPTION OF WELL STATUS CODE

The well status code on the Public-Industrial-Commercial (PICS) database explains the status of a well as it goes through different stages from when it was drilled to when it is no longer in existence. These classifications originally existed on the public water supply database and were obtained from Bulletin 60. When the public water supply database and the Illinois Wateruse Inventory Program (IWIP) database were incorporated, these status code were continued. A detailed explanation of each letter used in the well status column of the database follows:

- A - abandoned: when a well is no longer in existence but we do not have a plugging affidavit or know for sure if it has been filled in
- C - capped: when a cap is attached to the top of the well
- D - disconnected: when a well is disconnected from the system
- E - emergency: when a well is available for standby use
- I - in use: produces a major portion of water
- O - observation: used for water level measurements only
- S - sealed: when a well has been filled in
- U - unused: when a well exists but is not being used

Code: 43H
Re: 6E
Codes: 4

4 records were found for the specified locations.

Questions : Contact the Illinois State Water Survey's
Ground Water Division @ (217)333-9043
Publication: Please cite the Illinois State Water Survey's
Private-Well Database in all publications
based wholly or partially on this information.

Please Note:

The data in the Private Well Inventory Database is a listing of those non-municipal wells which are known to the Illinois State Water Survey (ISWS). This information has been entered verbatim from well logs submitted by the driller, chemical analysis reports, well sealing forms, well inventory forms from the 1930-1934 well survey, and other special projects. The accuracy of this data is controlled by those who submitted the form. Information in the private well database has not been verified.

McHenry County - Private Well Database - Page 2

TWN	RNG	SC	PL	OWNER	DRILLER	DATE	PERMIT	DEPTH	REC	US	LY	AO
43N	06E	04		R MILLER	L MAITLAND	08/00/1940	1	126	RG	DD	??	??
43N	06E	04	1E	TECHALLOY ILL INC	M NICE	11/29/1980	1096794	205	RG	CH	??	??
43N	06E	04	1E	TECHALLOY ILL INC	M NICE	12/19/1985	1121054	200	RG	IN	??	??
43N	06E	04	3D	UNION MILK COO		00/00/1938	1	1365	C	IN	??	??

McHenry

Township Code: 44N
Range Code: 6E
Section Codes: 33

4 records were found for the specified locations.

Questions : Contact the Illinois State Water Survey's
Ground Water Division @ (217)333-9043
Publication: Please cite the Illinois State Water Survey's
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McHenry County - Private Well Database - Page 2

TWN	RNG	SC	PL	OWNER	DRILLER	DATE	PERMIT	DPTH	REC	US	TY	AQ
44N	06E	33		G PONTO	M NICE	00/00/1983	1	18	A	DO	~	~
44N	06E	33	1A	J COLOSSA	P BARKER	03/30/1977	1058162	45	L	DO	~	~
44N	06E	33	4F	G PONTO	M NICE	12/20/1982	1105845	51	L	DO	~	~
44N	06E	33	BH	D BAUMAN	M NICE	11/20/1985	1121056	40	L	DO	~	~

Illinois State Water Survey PICS Database Page 1

County: McHenry

Township Code: 43N
Range Code: 6E
Section Codes: 4

7 records were found for the specified locations.

Questions : Contact the Illinois State Water Survey's
Ground Water Division @ (217)333-7223
Publication: Please cite the Illinois State Water Survey's
PICS (Public-Industrial-Commercial) Database
in all publications based wholly or partially
on this information.

Please Note:

The data in the PICS Database is a listing of municipal and large industrial and commercial wells which are known to the Illinois State Water Survey (ISWS). The information was initially entered from public water supply data and supplemented with the Illinois Water Inventory Project data. This database is updated as additional information is received and verified.

McHenry County -- PICS Database -- Page 2

Sws ID	Name	No.	Status	Location	Depth	Type log	drilled	Driller
11100910	TECHALLOY ILLINOIS INC	2	I	11143N06E041E	205	D	1980	MARVIN R NICE
11100910	TECHALLOY ILLINOIS INC	3	I	11143N06E041E	200	D	1985	MARVIN R NICE
11100910	TECHALLOY COMPANY INC	1	I	11143N06E041E	85	-	---	---
11190900	UNION	4	I	11143N06E045D	760	D	1989	LAYNE-WESTERN CO
11190900	UNION	1	S	11143N06E045F	16	-	1912	---
11190900	UNION	2	E	11143N06E045F	192	S	1934	P E MILLIS
11190900	UNION	3	E	11143N06E045H	80	D	1962	J P MILLER ART WELL

County: McHenry

Township Code: 44N

Range Code: 6E

Section Codes: 33

0 records were found for the specified locations.

Questions : Contact the Illinois State Water Survey's
Ground Water Division @ (217)333-7223

Publication: Please cite the Illinois State Water Survey's
PICS (Public-Industrial-Commercial) Database
in all publications based wholly or partially
on this information.

Please Note:

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**Illinois State Water Survey**

Telephone (217) 333-8888
2204 Griffith Drive
Champaign, Illinois 61820-7495

YOU ARE RECEIVING A TELEFAX FROM:

**ILLINOIS STATE WATER SURVEY
2204 GRIFFITH DRIVE
CHAMPAIGN, IL 61820**

VERIFICATION # -- 217/333-8888

WATER SURVEY TELEFAX NUMBER -- 217/333-6540

TO: Jack Gallagher

LOCATION: Roy F. Weston

FAX #: (708) 918-4055

FROM: Scott Meyer

DATE: 5-21-93

TOTAL NUMBER OF PAGES INCLUDING COVER: 5

COMMENTS: Log of Well 27623 does not agree with my
cross-section. Sorry for the error.

**IF YOU DO NOT RECEIVE ALL THE PAGES INDICATED, PLEASE CALL BACK AS
SOON AS POSSIBLE.**

White & Pink Copies:
Ill. D. of Public Health
Yellow Copy: Well Contractor
Golden Copy: Well Owner

Well Construction Report

30212

THIS FORM MUST BE COMPLETED WITHIN 30 DAYS
OF WELL COMPLETION AND SENT TO
THE ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 WEST JEFFERSON STREET
SPRINGFIELD, ILLINOIS 62761



GEOLOGICAL AND WATER SURVEYS WELL RECORD

9. Driller Mark E. Nice License No. 02-003209
10. Well Site Address N. Union Rd. Marenco
11. Property Owner Ronald Storms Well No. 114189
12. Permit No. 010580 Date Issued 11/4/89
13. Location: County McHenry
Sec. 28SE
Twp. 44N
Rge. 10E



1. Type of Well

a. Bored _____ Hole Diam. 5 in. Depth 55 ft
Buried Slab: Yes _____ No _____

b. Driven _____ Drive Pipe Diam. _____ in. Depth _____ ft

c. Drilled X Finished in Drift X In Rock _____

(KIND)	FROM (Ft.)	TO (Ft.)
Gravel	0	55

d. Grout: _____

14. Water from Gravel at depth 46 ft

15. Casing and Liner Pipe		to <u>55</u> ft	
Diam. (in)	Kind and Weight	From (ft)	To (ft)
<u>5</u>	<u>Plastic</u>	<u>0</u>	<u>55</u>
	<u>Schedule 40</u>		

Show location
in section
plat

SE NE SW
Lot 16

2. Well furnishes water for human consumption? Yes X No _____

3. Date well drilled 09/11/89

4. Permanent pump installed? Yes X Date 09/15/89 No _____
Manufacturer Ditta Type _____
Location in well
Capacity 15 gpm. Depth of setting 20 ft

5. Well top sealed? Yes X No _____ Type Williams Cap

6. Pitless adapter installed? Yes X No _____
Manufacturer Williams Model No. BSOAC
How attached to casing? locknut

7. Well disinfected? Yes X No _____

8. Pump and equipment disinfected Yes X No _____

IMPORTANT NOTICE

This State Agency is requesting disclosure of information
that is necessary to accomplish the statutory purpose as
outlined under Public Act 85-0863. Disclosure of this
information is mandatory. This form has been approved by
the Forms Management Center.

PRESS FIRMLY WITH BLACK PEN OR TYPE
Do Not Use Felt Pen

31482-0126

16. Screen: Diam. 5 in, Length 60 in, Slot Size 20

17. Size hole below casing 5 in. 18. Ground Elev. _____ ft msl.

19. Static level 8 ft below casing top which is 1 ft. above
ground level. Pumping level 18 ft, pumping gpm for 4 hours.

20. Earth Materials Passed Through	Depth of Top	Depth of Bottom
<u>Top Soil</u>	<u>2</u>	<u>2</u>
<u>Sandy Clay</u>	<u>43</u>	<u>45</u>
<u>Gravel</u>	<u>10</u>	<u>55</u>

Continue on separate sheet if necessary.

Signed MREW Date 1/16/90

White Copy -
Ill. Dept. of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INSTRUCTIONS TO DRILLERS

FILL IN ALL PERTINENT INFORMATION REQUESTED AND MAIL ORIGINAL TO STATE DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

27623

ILLINOIS DEPARTMENT OF PUBLIC HEALTH WELL CONSTRUCTION REPORT

GEOLOGICAL AND WATER SURVEYS WELL RECORD

1. Type of Well

- a. Dig ☐ Bored ☐ Hole Diam. 5 in. Depth 42 ft.
Curb material ☐ Buried Slab: Yes ☐ No ☐
b. Driven ☐ Drive Pipe Diam. ☐ in. Depth ☐ ft.
c. Drilled ☒ Finished in Drift ☐ In Rock ☐
Tubular ☐ Gravel Packed ☒
d. Grout:

(KIND)	FROM (FL)	TO (FL)
Gravel	0	10

2. Distance to Nearest:

Building 100 Ft. Seepage Tile Field ☐
Cess Pool ☐ Sewer (non Cast Iron) ☐
Privy ☐ Sewer (Cast Iron) ☐
Septic Tank 76 Barnyard ☐
Leaching Pit ☐ Manure Pile ☐

3. Well furnishes water for human consumption? Yes ☒ No ☐

4. Date well completed 12/5/79

5. Permanent Pump Installed? Yes ☒ Date 12/5/79 No ☐

Manufacturer Starite Type Subm Location in well
Capacity 10 gpm. Depth of Setting 20 Ft.

6. Well Top Sealed? Yes ☒ No ☐ Type Williams Cap

7. Pitless Adapter Installed? Yes ☒ No ☐

Manufacturer Williams Model Number B5DAC
How attached to casing? Locknut

8. Well Disinfected? Yes ☒ No ☐

9. Pump and Equipment Disinfected? Yes ☒ No ☐

10. Pressure Tank Size 10 gal. Type Well X Trol Location Basement

11. Water Sample Submitted? Yes ☐ No ☒

REMARKS:

10. Property owner Louis Scholz Well No.

Address 18010 West Rt. 176 Union, Ill

Driller Martin Nica License No. 102 003458

11. Permit No. 01239 Date 12/5/79

12. Water from Gravel 13. County McHenry

at depth 23 to 42 ft. Sec. 28.40

14. Screen: Diam. 5 in. Twp. 14E

Length: 4 ft. Slot 10 Rqs. GE

Elev.

15. Casing and Liner Pipe

Diam. (in.)	Kind and Weight	From (Fl.)	To (Fl.)
<u>5</u>	<u>Schedule 20 Plastic</u>	<u>0</u>	<u>40</u>

SHOW
LOCATION IN
SECTION PLAT
SW SW SW

16. Size Hole below casing: 5 in.

17. Static level 6 ft. below casing top which is 1 ft. above ground level. Pumping level 6 ft. when pumping at 10 gpm for 4 hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
Top Soil	<u>2</u>	<u>2</u>
Sand	<u>20</u>	<u>22</u>
Gravel	<u>20</u>	<u>42</u>

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED Martin Nica DATE 2/14/80

White Copy -
Ill. Dept. of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INSTRUCTIONS TO DRILLERS

FILL IN ALL PERTINENT INFORMATION RECORDED AND MAIL ORIGINAL TO STATE
DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST
JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER
SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

27627

ILLINOIS DEPARTMENT OF PUBLIC HEALTH WELL CONSTRUCTION REPORT

1. Type of Well

- a. Digged. Bored. Hole Diam. 5 in. Depth 45 ft.
Curb material. Buried Slab: Yes No
b. Driven. Drive Pipe Diam. in. Depth ft.
c. Drilled. Finished in Drift. In Rock.
Tubular. Gravel Packed.
d. Grout:

(KIND)	FROM (FL.)	TO (FL.)
Gravel	0	45

2. Distance to Nearest:

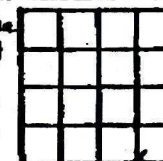
Building 35 Ft. Seepage Tile Field
Cess Pool. Sewer (non Cast iron)
Privy. Sewer (Cast iron)
Septic Tank 75 Barnyard
Leaching Pit. Manure Pile

3. Well furnishes water for human consumption? Yes No
4. Date well completed 12/20/79
5. Permanent Pump Installed? Yes No Date 12/20/79 No
Manufacturer Stalite Type Sub Location in well
Capacity 30 gpm. Depth of Setting 45 Ft.
6. Well Top Sealed? Yes No Type Williams Cap
7. Pitless Adapter Installed? Yes No
Manufacturer Williams Model Number B50AC
How attached to casing? Locknut
8. Well Disinfected? Yes No
9. Pump and Equipment Disinfected? Yes No
10. Pressure Tank Size 30 gal. Type Well X Tank
Location Basement
11. Water Sample Submitted? Yes No

REMARKS:

GEOLOGICAL AND WATER SURVEYS WELL RECORD

10. Property owner Donald Puller Well No. _____
Address 7814 Deems Rd Monticello, Ill
Driller in ill License No. 133-00710
11. Permit No. 2267 Date 12/20/79
12. Water from Gravel 13. County McHenry
at depth 44 to 45 ft. Sec. 30
14. Screen: Diam. in. Twp. 44N
Length: ft. Slot. Rge. 6E
Elev. _____



SHOW
LOCATION IN
SECTION PLAT
SW SE SE

15. Casing and Liner Pipe

Diam. (in.)	Kind and Weight	From (FL.)	To (FL.)
5	Black Steel	0	45
	15 lbs per ft		

16. Size Hole below casing: 2 in.
17. Static level 1 ft. below casing top which is 1 ft.
above ground level. Pumping level 10 ft. when pumping at
gpm for 2 hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
Top Soil	1	1
Sand & Gravel	42	43
Gravel	2	45

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED Man R m DATE 2/14/80

White Copy - Well Owner
Yellow Copy - Well Contractor
Blue Copy - Well Owner

ILLINOIS DEPARTMENT OF PUBLIC HEALTH WELL CONSTRUCTION REPORT

INSTRUCTIONS TO DRILLERS
FILL IN ALL PERTINENT INFORMATION REQUESTED AND MAIL ORIGINAL TO STATE DEPARTMENT OF PUBLIC HEALTH, ROOM 616, STATE OFFICE BUILDING, SPRINGFIELD, ILLINOIS 62706. DO NOT DETACH GEOLOGICAL/WATER SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

- Type of Well
 - a. Bored
 - b. Driven
 - c. Drilled
 - d. Cased
- Distance to Nearest:
 - Building
 - Cess Pool
 - Privy
 - Septic Tank
 - Leaching Pit
- Is water from this well to be used for human consumption?
 - Yes
 - No
- Date well completed
- Permanent Pump Installed?
 - Yes
 - No
- Manufacturer
- Capacity
- Depth of setting
- Well Top Sealed?
 - Yes
 - No
- Pileless Adaptor Installed?
 - Yes
 - No
- Well Disinfected?
 - Yes
 - No
- Water Sample Submitted?
 - Yes
 - No

(KIND)	FROM (FT.)	TO (FT.)

10. Property owner: Richard Margallias Well No. 1
 Address: R. F. D.
 Driller: Paul Barker License No. 92-563
 Permit No. NE 14506 Date May 4, 1972
 11. Water from Gravel 12. Water from Gravel
 at depth 80 ft. to 120 ft. 13. County McHenry
 14. Screens: Diam. 1/2 in. Length: 80 ft. Slot 1/2 in.
 15. Casing and Liner Pipe
 Kind and Weight 5 15 # Per Ft. From (ft.) 0 To (ft.) 80
 Section Plat 80' N 200' W
 SHOW LOCATION IN SECTION PLAT
 16. Size Hole below casing: 5 in.
 17. Static level 6 ft. below casing top which is 1 ft. above ground level. Pumping level 20 ft. when pumping at 30 gpm for 1 hours.
 18. FORMATIONS PASSED THROUGH
 THICKNESS DEPTH OF BOTTOM

Topsoil	Clay	0	30
Clay	Sand	30	80
Sand	Gravel	80	126

REMARKS:

IDPH 4.065
10/68

White Copy -
Hl. Dept. of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INSTRUCTIONS TO

FILL IN ALL PERTINENT INFORMATION REQUESTED AND MAIL ORIGINAL TO STATE
DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST
JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER
SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

ILLINOIS DEPARTMENT OF PUBLIC HEALTH WELL CONSTRUCTION REPORT

GEOLOGICAL AND WATER SURVEYS WELL RECORD

1. Type of Well

- a. Dig ☐ Bored ☐ Hole Diam. 5 in. Depth 125 ft.
Curb material ☐ Burled Slab: Yes ☐ No ☐
b. Driven ☐ Drive Pipe Diam. ☐ in. Depth ☐ ft.
c. Drilled ☒ Finished in Drift ☐ In Rock ☐
Tubular ☐ Gravel Packed ☒
d. Grout:

(KIND)	FROM (FT.)	TO (FT.)
Gravel	0	125

2. Distance to Nearest:

Building 20 Ft. Seepage Tile Field ☐
Cess Pool ☐ Sewer (non Cast Iron) ☐
Privy ☐ Sewer (Cast Iron) ☐
Septic Tank 80 Barnyard ☐
Leaching Pit ☐ Manure Pile ☐

3. Well furnishes water for human consumption? Yes ☒ No ☐

4. Date well completed 1/13/87

5. Permanent Pump Installed? Yes ☒ Date 1/13/87 No ☐

Manufacturer Belta Type Subm Location in well
Capacity 10 gpm. Depth of Setting 100 Ft.

6. Well Top Sealed? Yes ☒ No ☐ Type Williams Cap

7. Pitless Adapter Installed? Yes ☒ No ☐

Manufacturer Williams Model Number R50AC
How attached to casing? locknut

8. Well Disinfected? Yes ☒ No ☐

9. Pump and Equipment Disinfected? Yes ☒ No ☐

10. Pressure Tank Size 80 gal. Type Clayton Marx
Location Basement

11. Water Sample Submitted? Yes ☐ No ☒

REMARKS:

Co # 25533

Owner instructed to take sample.

10. Property owner Herbert Franks Well No. ☐

Address 19324 E. Grant Hwy. Marango

Driller Marvin Nico License No. 102 002458

11. Permit No. 128391 Date 11/25/86

12. Water from Gravel 13. County McHenry

at depth 120 to 125 ft. Sec. 6-3d

14. Screen: Diam. ☐ in. Twp. 43N

Length: ☐ ft. Slot ☐ Rge. 6E

Elev. ☐

15. Casing and Liner Pipe

Diam. (in.)	Kind and Weight	From (Ft.)	To (Ft.)
5	Black Steel 15 lbs per ft	0	125

SHOW
LOCATION IN
SECTION PLAT

NE NW SE

16. Size Hole below casing: 5 in.

17. Static level 20 ft. below casing top which is 1 ft.
above ground level. Pumping level 25 ft. when pumping at 10
gpm for 4 hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
Top Soil	2	2
Sand & Gravel	22	24
Clay	96	120
Gravel	5	120 125

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED Marvin Nico DATE 2/13/87

White Copy -
Ill. Dept. of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INSTRUCTIONS TO F 15

FILL IN ALL PERTINENT INFORMATION REQUESTED AND MAIL ORIGINAL TO STATE DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

F. Kurpinski

ILLINOIS DEPARTMENT OF PUBLIC HEALTH WELL CONSTRUCTION REPORT

1. Type of Well

- a. Dug ☐ Bored ☐ Hole Diam. 5 in. Depth 57 ft.
Curb material ☐ Buried Slab: Yes ☐ No ☐
b. Driven ☐ Drive Pipe Diam. ☐ in. Depth ☐ ft.
c. Drilled ☒ Finished in Drift ☐ In Rock ☐
Tubular ☐ Gravel Packed ☒
d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
Gravel	0	57

2. Distance to Nearest:

Building 35 Ft. Seepage Tile Field ☐
Cess Pool ☐ Sewer (non Cast iron) ☐
Privy ☐ Sewer (Cast iron) ☐
Septic Tank 72 Barnyard ☐
Leaching Pit ☐ Manure Pile ☐

3. Well furnishes water for human consumption? Yes ☒ No ☐
4. Date well completed 11/27/87
5. Permanent Pump Installed? Yes ☒ Date 12/1/87 No ☐
Manufacturer DELTA Type Subm Location in well
Capacity 10 gpm. Depth of Setting 20 Ft.
6. Well Top Sealed? Yes ☒ No ☐ Type Williams Cap
7. Pitless Adapter Installed? Yes ☒ No ☐
Manufacturer Williams Model Number B50AC
How attached to casing? Locknut
8. Well Disinfected? Yes ☒ No ☐
9. Pump and Equipment Disinfected? Yes ☒ No ☐
10. Pressure Tank Size 80 gal. Type Captive Air
Location Crawl Space
11. Water Sample Submitted? Yes ☐ No ☒

REMARKS:

Owner instructed to take sample.

Co # 26100

GEOLOGICAL AND WATER SURVEYS WELL RECORD

10. Property owner Steven Kopinski Well No.
Address 6313 Dunham Rd Union, Ill
Driller Marvin R. Nice License No. 102 002458
11. Permit No. 132936 Date 6/22/87
12. Water from Gravel 13. County McHenry
Formation
at depth 10 to 57 ft. Sec. 5.5g
14. Screen: Diam. in. Twp 43N
Length: ft. Slot Rge. 6E
Elev.

SHOW
LOCATION IN
SECTION PLAT

SE NE NW

15. Casing and Liner Pipe

Diam. (In.)	Kind and Weight	From (Ft.)	To (Ft.)
<u>5"</u>	<u>Black Steel</u>	<u>0</u>	<u>57</u>
	<u>15 lbs per ft</u>		

16. Size Hole below casing: 5 in.
17. Static level 7 ft. below casing top which is 1 ft.
above ground level. Pumping level 10 ft. when pumping at 10
gpm for 4 hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
Top soil	2	2
Brown Clay	8	10
Gravel	47	57

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED Marvin R. Nice DATE 2/26/88

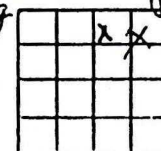
minutes & copies.
Ill. of Public Health
Yellow Copy: Well Contractor
Golden Copy: Well Owner

Well Construction Report

THIS FORM MUST BE COMPLETED WITHIN 30 DAYS
OF WELL COMPLETION AND SENT TO
THE ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 WEST JEFFERSON STREET
SPRINGFIELD, ILLINOIS 62761

GEOLOGICAL AND WATER SURVEYS WELL RECORD

9. Driller mark E. Nice License No. 102-003209
10. Well Site Address 6314 Dunham Rd., Marenco
11. Property Owner Mike Turck Well No. _____
12. Permit No. 013191c Date Issued 7/21/89
13. Location: County McHenry
Sec. 5.28
Twp. 43N
Rge. 6E



Show location
in section
plat

SW NE NE

1. Type of Well

a. Bored _____ Hole Diam. 5 in. Depth 180 ft

Buried Slab: Yes _____ No _____

b. Driven _____ Drive Pipe Diam. _____ in. Depth _____ ft

c. Drilled X Finished in Drift _____ In Rock X

(KIND)	FROM (Ft.)	TO (Ft.)
Grout: <u>Cuttings</u>	<u>0</u>	<u>110</u>

2. Well furnishes water for human consumption? Yes X No _____

3. Date well drilled 9/22/89

4. Permanent pump installed? Yes X Date 10/10/89 No _____

Manufacturer Delta Type Subm.

Location in well

Capacity 10 gpm. Depth of setting 100 ft.

5. Well top sealed? Yes X No _____ Type Williams Cap

6. Pitless adapter installed? Yes X No _____

Manufacturer Williams Model No. B50AC

How attached to casing? Locknut

7. Well disinfected? Yes X No _____

8. Pump and equipment disinfected Yes X No _____

35A.

IMPORTANT NOTICE

This State Agency is requesting disclosure of information
that is necessary to accomplish the statutory purpose as
outlined under Public Act 85-0863. Disclosure of this
information is mandatory. This form has been approved by
the Forms Management Center.

PRESS FIRMLY WITH BLACK PEN OR TYPE

Do Not Use Felt Pen

IL482-0126

look up

14. Water from Limestone at depth 110 ft

15. Casing and Liner Pipe		to <u>180</u> ft	
Diam. (in)	Kind and Weight	From (ft)	To (ft)
<u>5</u>	<u>Black Steel</u>	<u>0</u>	<u>110</u>
	<u>15 lbs Per Ft</u>		

16. Screen: Diam. _____ in, Length _____ in, Slot Size _____

17. Size hole below casing 5 in. 18. Ground Elev. _____ ft msl.

19. Static level 10 ft below casing top which is 1 ft. above
ground level. Pumping level 20 ft, pumping gpm for 4 hours.

20. Earth Materials Passed Through	Depth of Top	Depth of Bottom
<u>Top Soil</u>	<u>2</u>	<u>2</u>
<u>Sandy Clay</u>	<u>8</u>	<u>10</u>
<u>Gravel & Sand</u>	<u>65</u>	<u>75</u>
<u>Clay</u>	<u>35</u>	<u>110</u>
<u>Limestone</u>	<u>70</u>	<u>180</u>

Continue on separate sheet if necessary.

Signed [Signature] Date 11/7/89

ELEVATION 1120

Copy to: [illegible]

Address 17400 E. Jefferison, Denver

Driller John Pilcard License No. 42-574

11. Permit No. 70725 Date

12. Water from Limestone 13. County McHear

Formation _____
at depth 127 to 180 ft. Sec. 4

14. Screen: Diam. _____ in. Twp. 4-3-N

Length: ft. Slot Rq. 6E

Elev. 547

15. Casing and Liner Pipe

Diam. (in.)	Kind and Weight	From (Fl)	To (Fl)
5	Gg/v - 15	0	137

SHOW
LOCATION IN
SECTION PLAT
SE SW NE
(permit)

16. Size Hole below casing: 4 3/4 in.

17. Static level 35 ft. below casing top which is 2 ft. above ground level. Pumping level 50 ft. when pumping at 20 gpm for 1 hours. Sub pump @ 100'

[illegible]

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED

DATE 5/6/75

MCHENRY

COUNTY No 23323

4-43N-6E

FOUND NAME

CLEVA. I. C. N.

483 838

White Copy -
Ill. Dept. of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INSTRUCTIONS TO DRILLER

FILL IN ALL PERTINENT INFORMATION REQUESTED AND MAIL ORIGINAL TO STATE
DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST
JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER
SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

ILLINOIS DEPARTMENT OF PUBLIC HEALTH WELL CONSTRUCTION REPORT

1. Type of Well

- a. Dug ☐ Bored ☐ Hole Diam. 5 in. Depth 205 ft.
Curb material ☐ Buried Slab: Yes ☐ No ☐
b. Driven ☐ Drive Pipe Diam. ☐ in. Depth ☐ ft.
c. Drilled ☒ Finished in Drift ☐ In Rock ☒
Tubular ☐ Gravel Packed ☐
d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
Cuttings	0	120

2. Distance to Nearest:

Building 20 Ft. Seepage Tile Field ☐
Cess Pool ☐ Sewer (non Cast iron) ☐
Privy ☐ Sewer (Cast iron) ☐
Septic Tank 78 Barnyard ☐
Leaching Pit ☐ Manure Pile ☐

3. Well furnishes water for human consumption? Yes ☒ No ☐
4. Date well completed October 29, 1980
5. Permanent Pump Installed? Yes ☒ Date 10/29/80 No ☐
Manufacturer Red Jacket Type Subm Location in well
Capacity 20 gpm. Depth of Setting 105 Ft.
6. Well Top Sealed? Yes ☒ No ☐ Type Williams Cap
7. Pitless Adapter Installed? Yes ☒ No ☐
Manufacturer Williams Model Number B50AC
How attached to casing? Locknut
8. Well Disinfected? Yes ☒ No ☐
9. Pump and Equipment Disinfected? Yes ☒ No ☐
10. Pressure Tank Size 120 gal. Type Well X Trol
Location Building
11. Water Sample Submitted? Yes ☐ No ☒

REMARKS:

24734

GEOLOGICAL AND WATER SURVEYS WELL RECORD

10. Property owner Techalloy Ill. Inc Well No.
Address Jefferson & Olsen Rd Union, Illinois
Driller Marvin Nice License No. 102 002458
11. Permit No. 96794 Date October 21, 1980
12. Water from Limestone 13. County McHenry
Formation
at depth 120 to 205 ft. Sec. 4.1a
14. Screen: Diam. ☐ in. Twp. 43N
Length: ☐ ft. Slot ☐ Rge. 6E
Elev. ☐

15. Casing and Liner Pipe

Diam. (In.)	Kind and Weight	From (Ft.)	To (Ft.)
5"	Galv. Steel 15 lbs pr ft	0	120

SHOW
LOCATION IN
SECTION PLAT
SE SENE

(commercial operation)

16. Size Hole below casing: 5 in.
17. Static level 10 ft. below casing top which is 1 ft.
above ground level. Pumping level 15 ft. when pumping at 10
gpm for 4 hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
Top Soil	3	3
Gravel	32	35
Clay	83	118
Shale	2	120
Limestone (Gray & White)	85	205

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED Marvin Nice DATE February 12, 1981

White Copy -
Ill. Dept. of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INSTRUCTIONS FOR WELL DRILLERS

FILL IN ALL PERTINENT INFORMATION REQUESTED AND MAIL ORIGINAL TO STATE DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

ILLINOIS DEPARTMENT OF PUBLIC HEALTH WELL CONSTRUCTION REPORT

1. Type of Well

- a. Dug 50. Bored 205. Hole Diam. 205 in. Depth 205 ft.
Curb material . Buried Slab: Yes No
- b. Driven . Drive Pipe Diam. in. Depth ft.
- c. Drilled . Finished in Drift . In Rock .
Tubular . Gravel Packed .
- d. Grout:

(KIND)	FROM (FT.)	TO (FT.)
Cuttings	0	135

2. Distance to Nearest:

Building 15 Ft. Seepage Tile Field

Cess Pool Sewer (non Cast iron)

Privy Sewer (Cast iron)

Septic Tank 105 Barnyard

Leaching Pit Manure Pile

3. Well furnishes water for human consumption? Yes No

4. Date well completed 6/17/80

5. Permanent Pump Installed? Yes Date 6/17/80 No

Manufacturer Jacket Type Location in well
Capacity 100 gpm. Depth of Setting 130 Ft.

6. Well Top Sealed? Yes No Type Williamson Cap

7. Pitless Adapter Installed? Yes No

Manufacturer Williamson Model Number 250AC

How attached to casing? Locknut

8. Well Disinfected? Yes No

9. Pump and Equipment Disinfected? Yes No

10. Pressure Tank Size 100 gal. Type

Location

11. Water Sample Submitted? Yes No

REMARKS:

41A

GEOLOGICAL AND WATER SURVEYS WELL RECORD

10. Property owner George Grove Well No.

Address 6516 Olson Rd Union, Ill

Driller Marvin R. Nice License No. 103002657

11. Permit No. 103725 Date 6/17/80

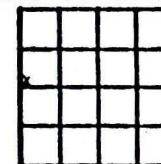
12. Water from Limestone 13. County Union

at depth 135 to 205 ft. Sec. 38

14. Screen: Diam. in. Twp. 43N

Length: ft. Slot Rge. 6E

Elev.



15. Casing and Liner Pipe

Diam. (in.)	Kind and Weight	From (Ft.)	To (Ft.)
50	Schedule 80	0	135
	Plastic		

SHOW
LOCATION IN
SECTION PLAT
Sw Sw NW

16. Size Hole below casing: 5 in.

17. Static level 20 ft. below casing top which is 1 ft.
above ground level. Pumping level 10 ft. when pumping at 10
gpm for 1 hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
Sand & Gravel	65	65
Clay	70	135
Limestone	70	205

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED Marvin R. Nice DATE 1/21/83

White Copy -
Ill. Dept. of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INSTRUCTIONS TO DRILLERS

FILL IN ALL PERTINENT INFORMATION REQUESTED AND MAIL ORIGINAL TO STATE
DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST
JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER
SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

ILLINOIS DEPARTMENT OF PUBLIC HEALTH WELL CONSTRUCTION REPORT

1. Type of Well

- a. Dug ☐ Bored ☐ Hole Diam. 5 in. Depth 42 ft.
Curb material ☐ Buried Slab: Yes ☐ No ☐
b. Driven ☐ Drive Pipe Diam. ☐ in. Depth ☐ ft.
c. Drilled ☒ Finished in Drift ☐ In Rock ☐
Tubular ☐ Gravel Packed ☒
d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
Gravel	0	42

2. Distance to Nearest:

Building 35 Ft. Seepage Tile Field ☐
Cess Pool ☐ Sewer (non Cast iron) ☐
Privy ☐ Sewer (Cast iron) ☐
Septic Tank 80 Barnyard ☐
Leaching Pit ☐ Manure Pile ☐

3. Well furnishes water for human consumption? Yes ☒ No ☐
4. Date well completed 4/19/82
5. Permanent Pump Installed? Yes ☒ Date 4/19/82 No ☐
Manufacturer Red Jacek Type Subm Location in well
Capacity 10 gpm. Depth of Setting 20 Ft.
6. Well Top Sealed? Yes ☒ No ☐ Type Williams Cap
7. Pitless Adapter Installed? Yes ☒ No ☐
Manufacturer Williams Model Number R50AC
How attached to casing? Locknut
8. Well Disinfected? Yes ☒ No ☐
9. Pump and Equipment Disinfected? Yes ☒ No ☐
10. Pressure Tank Size 30 gal. Type Well X Trol
Location Basement
11. Water Sample Submitted? Yes ☐ No ☒

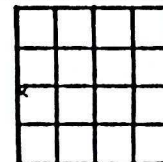
REMARKS:

ELEVATION

34A

GEOLOGICAL AND WATER SURVEYS WELL RECORD

10. Property owner Harold Koplin Well No. according to 10
Address 6606 Olson Rd Union, Illinois
Driller Marvin Nice License No. 102 002453
11. Permit No. 103042 Date 4/9/82
12. Water from Gravel Formation
at depth 3 to 42 ft.
13. County McHenry
14. Screen: Diam. ☐ in. Sec. 3.81
Length: ☐ ft. Slot ☐ Rge. 43N
Elev. 838



SHOW
LOCATION IN
SECTION PLAT
(10' x 10' Grid)

15. Casing and Liner Pipe

Diam. (in.)	Kind and Weight	From (Ft.)	To (Ft.)
5"	Schedule 80	0	42
	Plastic		

16. Size Hole below casing: 5 in.
17. Static level 8 ft. below casing top which is 1 ft.
above ground level. Pumping level 12 ft. when pumping at 10
gpm for 4 hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
Top Soil	2	?
Sand & Gravel	40	42

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED Marvin Nice DATE 5/1/82

Ill. Dept. of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INST TION DRILLERS

FILL IN ALL PERTINENT INFORMATION REQUESTED AND MAIL ORIGINAL TO STATE
DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST
JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER
SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
WELL CONSTRUCTION REPORT

1. Type of Well

- a. Dug ☐ Bored ☐ Hole Diam. 5 in. Depth 51 ft.
Curb material ☐ Buried Slab: Yes ☐ No ☐
b. Driven ☐ Drive Pipe Diam. ☐ in. Depth ☐ ft.
c. Drilled ☒ Finished in Drift ☐ In Rock ☐
Tubular ☐ Gravel Packed ☐
d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
Gravel	0	51

2. Distance to Nearest:

Building 20 Ft. Seepage Tile Field ☐
Cess Pool ☐ Sewer (non Cast iron) ☐
Privy ☐ Sewer (Cast iron) ☐
Septic Tank 65 Barnyard ☐
Leaching Pit ☐ Manure Pile ☐

3. Well furnishes water for human consumption? Yes ☒ No ☐

4. Date well completed 12/20/82

5. Permanent Pump Installed? Yes ☒ Date 12/20/82 No ☐

Manufacturer Red Jacket Type sub Location in well

Capacity 10 gpm. Depth of Setting 10 Ft.

6. Well Top Sealed? Yes ☒ No ☐ Type Williams Cap

7. Pitless Adapter Installed? Yes ☒ No ☐

Manufacturer Williams Model Number 250AG

How attached to casing? Locknut

8. Well Disinfected? Yes ☒ No ☐

9. Pump and Equipment Disinfected? Yes ☒ No ☐

10. Pressure Tank Size 10 gal. Type well

Location Basement

11. Water Sample Submitted? Yes ☐ No ☒

REMARKS:

27631

GEOLOGICAL AND WATER SURVEYS WELL RECORD

10. Property owner George Ponto Well No.
Address 4120 W. Union Rd Union, Illinois

Driller Marvin Rice License No. 102-000152

11. Permit No. 105845 Date 12/9/82

12. Water from Gravel 13. County McHenry

at depth 13 to 51 ft. Sec. 33.48

14. Screen: Diam. ☐ in. Twp. 44N

Length: ☐ ft. Slot ☐ Rge. 6E

Elev. ☐

15. Casing and Liner Pipe

Diam. (in.)	Kind and Weight	From (Ft.)	To (Ft.)
<u>5"</u>	<u>Black Steel</u>	<u>0</u>	<u>51</u>

SHOW
LOCATION IN
SECTION PLAT
NW SW NE

16. Size Hole below casing: 5 in.

17. Static level 10 ft. below casing top which is 7 ft.

above ground level. Pumping level 20 ft. when pumping at 10

gpm for 1 hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
Top Soil	<u>2</u>	<u>2</u>
Sand & Gravel	<u>13</u>	<u>15</u>
Large Gravel	<u>6</u>	<u>51</u>

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED Marvin Rice DATE 1/26/82

#3

(23710-50M-9-60)

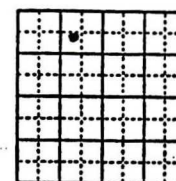


Page 1

ILLINOIS GEOLOGICAL SURVEY, URBANA

Strata	Thickness	Top	Bottom
Top Soil	3	0	3
Sand	12	3	15
Sand and Gravel	65	15	80
Size of well: 30 inch, surface to 80'.			
Casing: 12" Inside Diameter 0 to 60'.			
12" Inside Diameter 60 to 80'.			
Cook Screen			
Water at 6'.			
Main supply at 60-80'			
Drawdown 8'.			
Yield 1000 gallons per minute.			

COMPANY J. P. Miller Artesian Well Company
FARM City of Union NO. 3
DATE DRILLED March 1962 COUNTY NO. 280
AUTHORITY J. P. Miller Artesian Well Company
ELEVATION 520'S + 2200'E of NW corner
LOCATION 700'N line 1800'W line of section
COUNTY McHENRY



4-43N-6E

43N6E-4.5H

TOWN

TOWNSHIP

R. 6E

COMPANY P. E. Millis

NO. #2 T.

FARM Union Village

NO.

43

DATE DRILLED 1934

N

AUTHORITY Summary sample Study

COLLECTOR

ELEVATION 842 top. map

SEC.

4

No.	Strata	Thickness		Depth	
		Feet	In.	Feet	In.
Co# 226	Studied by C. L. Horberg, May 10, 1946				
	PLEISTOCENE SYSTEM				
	Wisconsin stage				
	Gravel, sandy, oxidized, brown	5		5	
	Gravel, up to 1/2", sandy	5		10	
	Gravel, granular, sandy	5		15	
	Gravel, up to 1/4", sandy	15		30	
	Gravel, granular	5		35	
	Till, calcareous, maroon (Marengo)	30		65	
	Till, calcareous, pinkish-grey, tan	5		70	
	Quartzitic fragments, boulder	2		72	
	Till, as above	48		120	
	Same, gravelly	10		130	
	Illinoian (?) stage				
	Till, calcareous, light brown	15		145	
	ORDOVICIAN SYSTEM				
	Maquoketa shale				
	Shale, light greenish-grey	5		150	
	Dolomite, crystalline, pyritic, white	40		190	

COUNTY McHenry

4-43N-6E

SAMPLE SET NO. 1493

(84107-20M-6-45)

ILLINOIS GEOLOGICAL SURVEY, URBANA

MCHENRY COUNTY GROUNDWATER PROTECTION PROJECTS

LITHOLOGIC/STRATIGRAPHIC DATA ENTRY FORM

PAGE 1 of 1

COUNTY WATER WELL NUMBER 94A

ELEVATION 841 ft

TWP/RNG 43 N, 6 E SECT 4

FOOT 2555 N or (S) (L) 2140 E or (W) (L)

TOPOGRAPHIC MAP Marengo South

DRILLER Layne - Western

DRIIFT THICKNESS 121 ft

ELEVATION OF BEDROCK SURF 720 ft

DATE OF DATA 3 / - / 89

DATA QUALITY . ~~FIELD~~-VERIFIED? ✓

COMMENT Verified by Dot Woller, ISWS

SW corner
Elm +
Jefferson
Street

+++++

[illegible]

Copy
... Dept. of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INSTRUCTIONS TO DRILLERS

FILL IN ALL PERTINENT INFORMATION REQUESTED AND MAIL ORIGINAL TO STATE
DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST
JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER
SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
WELL CONSTRUCTION REPORT

1. Type of Well

- a. Dug ☐ Bored ☐ Hole Diam. 5 in. Depth 225 ft.
Curb material ☐ Buried Slab: Yes ☐ No ☐
b. Driven ☐ Drive Pipe Diam. ☐ in. Depth ☐ ft.
c. Drilled ☒ Finished in Drift ☐ In Rock ☒
Tubular ☐ Gravel Packed ☐
d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)

2. Distance to Nearest:

Building 30 Ft. Seepage Tile Field 110
Cess Pool ☐ Sewer (non Cast iron) ☐
Privy ☐ Sewer (Cast iron) ☐
Septic Tank 100 Barnyard ☐
Leaching Pit ☐ Manure Pile ☐

3. Well furnishes water for human consumption? Yes ☒ No ☐

4. Date well completed April 18 1977

5. Permanent Pump Installed? Yes ☒ Date 4/20/77 No ☐

Manufacturer Sta-Rite Type 2 Location in well

Capacity 30 gpm. Depth of Setting 110 Ft.

6. Well Top Sealed? Yes ☒ No ☐ Type Wells

7. Pitless Adapter Installed? Yes ☒ No ☐

Manufacturer Wells Model Number ☐

How attached to casing? U-Bolt

8. Well Disinfected? Yes ☒ No ☐

9. Pump and Equipment Disinfected? Yes ☒ No ☐

10. Pressure Tank Size 10 gal. Type Well-X-Trol

Location in basement

11. Water Sample Submitted? Yes ☒ No ☐

REMARKS:

23328

GEOLOGICAL AND WATER SURVEYS WELL RECORD

10. Property owner LaVern Burnner Well No. ☐

Address 16524 Prairie Street Union, Ill

Driller Paul Barker License No. 92-563

11. Permit No. 52270 Date September 16 1976

12. Water from Rock and shale 13. County McHenry

Formation
at depth 145 to 225 ft.

14. Screen: Diam. ☐ in.

Length: ☐ ft. Slot ☐

Sec. 215g
Twp. 43N
Rge. 6E
Elev. ☐

15. Casing and Liner Pipe

Diam. (in.)	Kind and Weight	From (Ft.)	To (Ft.)
<u>5</u>	<u>15# per ft.</u>	<u>0</u>	<u>145</u>

SHOW
LOCATION IN
SECTION PLAT

80°N, 75°E, sec.
SE 16 NW

16. Size Hole below casing: 5 in.

17. Static level 30 ft. below casing top which is 12 inches ft.
above ground level. Pumping level 94 ft. when pumping at 20
gpm for 3 hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
<u>clay</u>	<u>0</u>	<u>145</u>
<u>rock and shale</u>	<u>145</u>	<u>225</u>

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED Paul Barker DATE May 27-77

White Copy -
Ill. Dept. of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INSTRUCTIONS TO DRILLERS

FILL IN ALL PERTINENT INFORMATION REQUESTED. MAIL ORIGINAL TO STATE DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

ILLINOIS DEPARTMENT OF PUBLIC HEALTH WELL CONSTRUCTION REPORT

1. Type of Well

- a. Dug ☐ Bored ☐ Hole Diam. 5 in. Depth 200 ft.
Curb material ☐ Buried Slab: Yes ☐ No ☐
b. Driven ☐ Drive Pipe Diam. ☐ in. Depth ☐ ft.
c. Drilled ☒ Finished in Drift ☐ In Rock ☒
Tubular ☐ Gravel Packed ☐
d. Grout: ☐

(KIND)	FROM (FT.)	TO (FT.)
CUTTINGS	0	170

2. Distance to Nearest:

Building 30 Ft. Seepage Tile Field ☐
Cess Pool ☐ Sewer (non Cast iron) ☐
Privy ☐ Sewer (Cast iron) ☐
Septic Tank 60 Barnyard ☐
Leaching Pit ☐ Manure Pile ☐

3. Well furnishes water for human consumption? Yes ☒ No ☐

4. Date well completed 10/15/86

5. Permanent Pump Installed? Yes ☒ Date 10/15/86 No ☐

Manufacturer ROTHSCHILD Type SUSAN Location IN WELL
Capacity 10 gpm. Depth of Setting 120 Ft.

6. Well Top Sealed? Yes ☒ No ☐ Type WILLIAMS CAP

7. Pitless Adapter Installed? Yes ☒ No ☐

Manufacturer WILLIAMS Model Number BDAC
How attached to casing? LOCKED

8. Well Disinfected? Yes ☒ No ☐

9. Pump and Equipment Disinfected? Yes ☒ No ☐

10. Pressure Tank Size 30 gal. Type WELL-X-TRAIL
Location BASEMENT

11. Water Sample Submitted? Yes ☐ No ☒

REMARKS:

Co # 25243

OWNER INSTRUCTED TO TAKE SAMPLE.

GEOLOGICAL AND WATER SURVEYS WELL RECORD

10. Property owner ALFRED SCHULTZ Well No.
Address 17319 E. CARR RD. UNION
Driller MANN NICE License No. 102-002458
11. Permit No. 124999 Date 7/2/86
12. Water from limestone Formation
at depth 170 to 200 ft. Sec. 9.3d
13. County McHenry
14. Screen: Diam. ☐ in. Twp. 43N
Length: ☐ ft. Slot ☐ Rge. 6E
Elev. ☐

15. Casing and Liner Pipe

Diam. (in.)	Kind and Weight	From (Ft.)	To (Ft.)
5"	BLACK STEEL	0	170
	15 LB PER FT		

SHOW
LOCATION IN
SECTION PLAT

NE NW SE

16. Size Hole below casing: 5 in.
17. Static level 30 ft. below casing top which is 1 ft.
above ground level. Pumping level 60 ft. when pumping at 10
gpm for 4 hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
TOP SOIL	2	2
CLAY	48	50
SAND & GRAVEL	4	54
CLAY	86	140
SHALE	30	170
LIMESTONE	30	200

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED MANN NICE DATE 3/12/87

White Copy -
Ill. Dep't of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INSTRUCTIONS TO DRILLERS

FILL IN ALL PERTINENT INFORMATION REQUESTED AND MAIL ORIGINAL TO STATE DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

ILLINOIS DEPARTMENT OF PUBLIC HEALTH WELL CONSTRUCTION REPORT

1. Type of Well

- a. Dug ☐ Bored ☐ Hole Diam. 5 in. Depth 42 ft.
Curb material ☐ Buried Slab: Yes ☐ No ☐
b. Driven ☐ Drive Pipe Diam. ☐ in. Depth ☐ ft.
c. Drilled ☒ Finished in Drift ☐ In Rock ☐
Tubular ☐ Gravel Packed ☒
d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
Gravel	0	42

2. Distance to Nearest:

Building 35 Ft. Seepage Tile Field ☐
Cess Pool ☐ Sewer (non Cast iron) ☐
Privy ☐ Sewer (Cast iron) ☐
Septic Tank 80 Barnyard ☐
Leaching Pit ☐ Manure Pile ☐

3. Well furnishes water for human consumption? Yes ☒ No ☐

4. Date well completed 4/19/82

5. Permanent Pump Installed? Yes ☒ Date 4/19/82 No ☐

Manufacturer Red Jack Type Subm Location in well

Capacity 10 gpm. Depth of Setting 20 Ft.

6. Well Top Sealed? Yes ☒ No ☐ Type Williams Cap

7. Pitless Adapter Installed? Yes ☒ No ☐

Manufacturer Williams Model Number R50AC

How attached to casing? Locknut

8. Well Disinfected? Yes ☒ No ☐

9. Pump and Equipment Disinfected? Yes ☒ No ☐

10. Pressure Tank Size 80 gal. Type Well Trol

Location Basement

11. Water Sample Submitted? Yes ☐ No ☒

REMARKS:

RECEIVED

JUL 27 1982

McHENRY COUNTY
DEPT. OF HEALTH

GEOLOGICAL AND WATER SURVEYS WELL RECORD

10. Property owner Harold Koplin Well No. ☐

Address 6606 Olson Rd Union, Illinois

Driller Marvin Hico License No. 102 002458

11. Permit No. 103042 Date 4/9/82

12. Water from Gravel 13. County McHenry

at depth 3 to 42 ft. Sec. 3

14. Screen: Diam. ☐ in. Twp. 43N

Length: ☐ ft. Slot ☐ Rge. 6E

Elev. ☐

15. Casing and Liner Pipe

Diam. (In.)	Kind and Weight	From (Ft.)	To (Ft.)
<u>5"</u>	<u>Schedule 40</u>	<u>0</u>	<u>42</u>
	<u>Plastic</u>		

SHOW
LOCATION IN
SECTION PLAT

16. Size Hole below casing: 5 in.

17. Static level 8 ft. below casing top which is 1 ft.
above ground level. Pumping level 12 ft. when pumping at 10
gpm for 4 hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
<u>Top Soil</u>	<u>2</u>	<u>2</u>
<u>Sand & Gravel</u>	<u>40</u>	<u>42</u>

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED Marvin Hico DATE 5/4/82

White Copy -
Ill. Dept. of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INSTRUCTIONS TO DRILLERS

FILL IN ALL PERTINENT INFORMATION REQUESTED AND MAIL ORIGINAL TO STATE
DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST
JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER
SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

ILLINOIS DEPARTMENT OF PUBLIC HEALTH WELL CONSTRUCTION REPORT

1. Type of Well

- a. Dug . Bored . Hole Diam. 20 1/2 in. Depth 205 ft.
Curb material . Buried Slab: Yes No
- b. Driven . Drive Pipe Diam. in. Depth ft.
- c. Drilled . Finished in Drift . In Rock .
Tubular . Gravel Packed .
- d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
Cuttings	0	135

2. Distance to Nearest:

Building 15 Ft. Seepage Tile Field
Cess Pool Sewer (non Cast iron)
Privy Sewer (Cast iron)
Septic Tank 105 Barnyard
Leaching Pit Manure Pile

3. Well furnishes water for human consumption? Yes No

4. Date well completed 6/17/83

5. Permanent Pump Installed? Yes Date 6/17/83 No

Manufacturer Red Jacket Type Pump Location in well
Capacity 15 gpm. Depth of Setting 100 Ft.

6. Well Top Sealed? Yes No Type Illinois cap

7. Pitless Adapter Installed? Yes No

Manufacturer Illinois Model Number 20010

How attached to casing? Locknut

8. Well Disinfected? Yes No

9. Pump and Equipment Disinfected? Yes No

10. Pressure Tank Size 100 gal. Type all in one

Location subsequent

11. Water Sample Submitted? Yes No

REMARKS:

RECEIVED

MAR 15 1983

McHENRY COUNTY
DEPT. OF HEALTH

GEOLOGICAL AND WATER SURVEYS WELL RECORD

10. Property owner George Grove Well No.

Address 2112 Glen Rd Union, Ill

Driller Rayvin E. Nico License No. 100002457

11. Permit No. 102725 Date 7/25/83

12. Water from Limestone 13. County McHenry

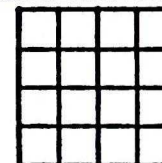
Formation

at depth 135 to 205 ft. Sec. 2

14. Screen: Diam. in. Twp. 13N

Length: ft. Slot Rge. 6E

Elev.



SHOW
LOCATION IN
SECTION PLAT

15. Casing and Liner Pipe

Diam. (in.)	Kind and Weight	From (Ft.)	To (Ft.)
40	Schedule 40 Plastic	0	135

16. Size Hole below casing: 5 in.

17. Static level 20 ft. below casing top which is 1 ft.
above ground level. Pumping level 10 ft. when pumping at 10
gpm for 1 hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
Sand & Gravel	65	65
Clay	70	135
Limestone	70	205

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED Rayvin E. Nico DATE 1/21/83

White Copy: Pink Copies:
Ill. Dept. of Public Health
Yellow Copy: Well Contractor
Golden Copy: Well Owner

Well Construction Report

THIS FORM MUST BE COMPLETED WITHIN 30 DAYS
OF WELL COMPLETION AND SENT TO
THE ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 WEST JEFFERSON STREET
SPRINGFIELD, ILLINOIS 62761

GEOLOGICAL AND WATER SURVEYS WELL RECORD

9. Driller LARRY Keller License No. 092-0072
10. Well Site Address 17201 Jefferson UNION
11. Property Owner Lechner Bros. Inc. Well No. _____
12. Permit No. F-137 Date Issued 10-3-90
13. Location: _____ County McHenry

Sec. 4
Twp. 43
Rge. 6

1. Type of Well

a. Bored _____ Hole Diam. _____ in. Depth _____ ft
Buried Slab: Yes _____ No _____
b. Driven _____ Drive Pipe Diam. _____ in. Depth 36 ft
c. Drilled ☒ Finished in Drift ☒ In Rock _____

d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
<u>NONE</u>		
<u>CABLE</u>		
<u>Tool</u>		

2. Well furnishes water for human consumption? Yes ☒ No _____
3. Date well drilled 12-15-90
4. Permanent pump installed? Yes ☒ Date 4-25-91 No _____
Manufacturer GRONDEOS Type Sub.
Location In Well
Capacity 20 gpm. Depth of setting 20' ft.
5. Well top sealed? Yes ☒ No _____ Type Williams
6. Pitless adapter installed? Yes ☒ No _____
Manufacturer Williams Model No. B50ACU
How attached to casing? Bolt Thru
7. Well disinfected? Yes ☒ No _____
8. Pump and equipment disinfected Yes ☒ No _____

IMPORTANT NOTICE

This State Agency is requesting disclosure of information
that is necessary to accomplish the statutory purpose as
outlined under Public Act 85-0863. Disclosure of this
information is mandatory. This form has been approved by
the Forms Management Center.

PRESS FIRMLY WITH BLACK PEN OR TYPE
Do Not Use Felt Pen

IL482-0126

14. Water from SAND & GRAVEL at depth 36 ft

15. Casing and Liner Pipe	to _____ ft	Show location
Diam.(in)	Kind and Weight	From (ft) To (ft) in section plat
<u>5"</u>	<u>15.00 LB Steel</u>	<u>0</u> <u>36</u>

OPEN BOTTOM
16. Screen: Diam. _____ in, Length _____ in, Slot Size _____
17. Size hole below casing _____ in. 18. Ground Elev. _____ ft msl.
19. Static level 6 ft below casing top which is 1 ft. above
ground level. Pumping level 10 ft, pumping 20 gpm for 24 hours.

20. Earth Materials Passed Through	Depth of Top	Depth of Bottom
<u>TOP SOIL</u>	<u>0</u>	<u>3</u>
<u>SAND & GRAVEL</u>	<u>3</u>	<u>36</u>

Continue on separate sheet if necessary.

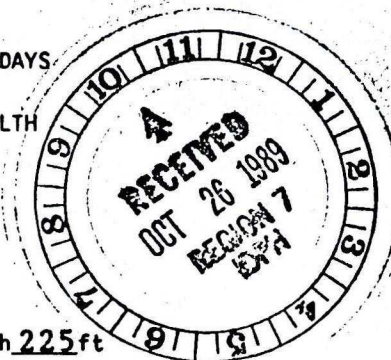
Signed Larry Keller Date 5-20-91

R

es:
Public Health
Well Contractor
Copy Well Owner

Well Construction Report

THIS FORM MUST BE COMPLETED WITHIN 30 DAYS
OF WELL COMPLETION AND SENT TO
THE ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 WEST JEFFERSON STREET
SPRINGFIELD, ILLINOIS 62761



GEOLOGICAL AND WATER SURVEYS WELL RECORD

9. Driller Craig A. Nice License No 102-003191
10. Well Site Address 7218 Northrup Rd, Union
11. Property Owner Thomas Toppel Well No. _____
12. Permit No 012993 Date Issued 07/17/89
13. Location: _____ County McHenry

Sec. 9
Twp 43N
Rge 6E

1. Type of Well

a. Bored _____ Hole Diam. 5 in. Depth 225 ft
Buried Slab: Yes _____ No _____
b. Driven _____ Drive Pipe Diam. _____ in. Depth _____ ft
c. Drilled X Finished 10 Drift _____ In Rock X

(KIND)	FROM (Ft.)	TO (Ft.)
d. Grout: <u>Cuttings</u>	<u>0</u>	<u>155</u>

2. Well furnishes water for human consumption? Yes X No _____
3. Date well drilled 08/25/89
4. Permanent pump installed? Yes X Date 09/13/89 No _____
Manufacturer Red Jacket Type Subm.
Location in Well
Capacity 20 gpm. Depth of setting 160 ft.
5. Well top sealed? Yes X No _____ Type Williams Cap
6. Pitless adapter installed? Yes X No _____
Manufacturer XXXXXXXXXX Williams Model No. B50AC
How attached to casing? Locknut
7. Well disinfected? Yes X No _____
8. Pump and equipment disinfected? Yes X No _____

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PRESS FIRMLY WITH BLACK PEN OR TYPE
Do Not Use Felt Pen

14. Water from Limestone at depth 155 ft
to 225 ft
15. Casing and Liner Pipe
Diam. (in) 5 Kind and Weight Black Steel From (ft) 0 To (ft) 155
15 Lbs. Per Ft.

16. Screen: Diam. _____ in, Length _____ in, Slot Size _____
17. Size hole below casing 5 in. 18. Ground Elev. _____ ft msl.
19. Static level 30 ft below casing top which is 1 ft. above ground level. Pumping level 40 ft, pumping gpm for 4 hours.

20. Earth Materials Passed Through	Depth of Top	Depth of Bottom
Top Soil	2	2
Sand & Clay	43	45
Clay	65	110
Sand & Gravel	45	155
Limestone	70	225

Continue on separate sheet if necessary.

Signed _____

Date 10/17/89

White Copy -
Ill. Dept. of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INSTRUCTIONS TO DRILLERS

FILL IN ALL PERTINENT INFORMATION REQUESTED AND MAIL ORIGINAL TO STATE
DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST
JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER
SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

ILLINOIS DEPARTMENT OF PUBLIC HEALTH WELL CONSTRUCTION REPORT

1. Type of Well

- a. Dug ☐ Bored ☐ Hole Diam. 2 in. Depth 124 ft.
Curb material ☐ Buried Slab: Yes ☐ No ☐
b. Driven ☐ Drive Pipe Diam. ☐ in. Depth ☐ ft.
c. Drilled ☒ Finished in Drift ☐ In Rock ☐
Tubular ☐ Gravel Packed ☒
d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
Gravel	0	124

2. Distance to Nearest:

Building 10 Ft. Seepage Tile Field ☐
Cess Pool ☐ Sewer (non Cast iron) ☐
Privy ☐ Sewer (Cast iron) ☐
Septic Tank 100 Barnyard ☐
Leaching Pit ☐ Manure Pile ☐

3. Well furnishes water for human consumption? Yes ☒ No ☐

4. Date well completed 6/14/82

5. Permanent Pump Installed? Yes ☒ Date 6/14/82 No ☐

Manufacturer Red Jacket Type Subm Location in well
Capacity 20 gpm. Depth of Setting 120 Ft.

6. Well Top Sealed? Yes ☒ No ☐ Type Williams Cap

7. Pitless Adapter Installed? Yes ☐ No ☒

Manufacturer Williams Model Number 350AC

How attached to casing? Locknut

8. Well Disinfected? Yes ☒ No ☐

9. Pump and Equipment Disinfected? Yes ☒ No ☐

10. Pressure Tank Size 120 gal. Type Well with

Location Pump House

11. Water Sample Submitted? Yes ☐ No ☒

REMARKS:

RECEIVED

MAR 15 1983

McHENRY COUNTY
DEPT. OF HEALTH

GEOLOGICAL AND WATER SURVEYS WELL RECORD

10. Property owner Seven Acres Pkwy Well No.

Address 2512 Union Road Union, Ill

Driller Marvin Rice License No. 102 002452

11. Permit No. 102221 Date 5/10/82

12. Water from Gravel 13. County McHenry

at depth 120 to 124 ft. Sec. 16

14. Screen: Diam. ☐ in. Twp. 42N

Length: ☐ ft. Slot ☐ Rge. 6E

Elev. ☐

15. Casing and Liner Pipe

Diam. (in.)	Kind and Weight	From (Ft.)	To (Ft.)
<u>6"</u>	<u>Schedule 40</u>	<u>0</u>	<u>124</u>
	<u>Plastic</u>		

SHOW
LOCATION IN
SECTION PLAT

16. Size Hole below casing: 2 in.

17. Static level 60 ft. below casing top which is 1 ft.

above ground level. Pumping level 100 ft. when pumping at 10

gpm for 1 hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
<u>Top Soil</u>	<u>3</u>	<u>3</u>
<u>Sand & Gravel</u>	<u>27</u>	<u>30</u>
<u>Gray Clay & Layers of Gravel</u>	<u>150</u>	<u>180</u>
<u>Gravel</u>	<u>14</u>	<u>194</u>

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED Marvin Rice DATE 1/21/83

White Copy: Copies:
Ill. Dept. of Public Health
Yellow Copy: Well Contractor
Golden Copy: Well Owner

Well Construction Report

THIS FORM MUST BE COMPLETED WITHIN 30 DAYS
OF WELL COMPLETION AND SENT TO
THE ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 WEST JEFFERSON STREET
SPRINGFIELD, ILLINOIS 62761

1. Type of Well

a. Bored _____ Hole Diam. _____ in. Depth _____ ft

Buried Slab: Yes _____ No _____

b. Driven _____ Drive Pipe Diam. _____ in. Depth _____ ft

c. Drilled ☒ Finished in Drift _____ In Rock ☒

d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
DRILL		
SLURRY	0	211

2. Well furnishes water for human consumption? Yes ☒ No _____

3. Date well drilled 9-18-92

4. Permanent pump installed? Yes ☒ Date _____ No _____

Manufacturer Sta-Rite Type Sub.

Location In well

Capacity 10 gpm. Depth of setting 160 ft.

5. Well top sealed? Yes ☒ No _____ Type Williams

6. Pitless adapter installed? Yes ☒ No _____

Manufacturer Williams Model No. B50ACV

How attached to casing? Belt Thru

7. Well disinfected? Yes ☒ No _____

8. Pump and equipment disinfected Yes ☒ No _____

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PRESS FIRMLY WITH BLACK PEN OR TYPE
Do Not Use Felt Pen

IL482-0126

GEOLOGICAL AND WATER SURVEYS WELL RECORD

9. Driller LARRY KELLER License No. 092-00721

10. Well Site Address Lot 17 FAIR LN. UNION IL.

11. Property Owner MICHAEL RIZZO Well No. _____

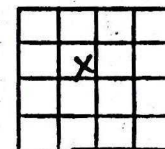
12. Permit No. E-3733 Date Issued 4-2-91

13. Location: County Mc HENRY

Sec. 26

Twp. 43N

Rge. 6E



14. Water from Lime Stone at depth 211 ft

15. Casing and Liner Pipe to 235 ft

Diam.(in)	Kind and Weight	From (ft)	To (ft)
5"	BL.Steel 15.00#	0	211

Show location
in section
plat

16. Screen: Diam. _____ in, Length _____ in, Slot Size _____

17. Size hole below casing 4 3/4 in. 18. Ground Elev. _____ ft msl.

19. Static level 45 ft below casing top which is 1 ft. above ground level. Pumping level 100 ft, pumping 5 gpm for 12 hours.

20. Earth Materials Passed Through	Depth of Top	Depth of Bottom
TAN SAND & GRAVEL	0	20
BR. Stony CLAY	20	95
GREY SAND - WATER DIRTY	95	105
GREY Stony CLAY	105	211
White Limestone - SHALE	211	235

Continue on separate sheet if necessary.

Signed Larry Keller Date 11-2-92

White Copy: Copies:
Ill. Dept. of Public Health
Yellow Copy: Well Contractor
Golden Copy: Well Owner

Well Construction Report

THIS FORM MUST BE COMPLETED WITHIN 30 DAYS
OF WELL COMPLETION AND SENT TO
THE ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 WEST JEFFERSON STREET
SPRINGFIELD, ILLINOIS 62761

1. Type of Well

a. Bored _____ Hole Diam. 5 in. Depth 70 ft
Buried Slab: Yes _____ No _____
b. Driven _____ Drive Pipe Diam. _____ in. Depth _____ ft
c. Drilled X Finished in Drift X In Rock _____
d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
Bentonite	0	65
Slurry		

2. Well furnishes water for human consumption? Yes X No _____

3. Date well drilled 7/24/92

4. Permanent pump installed? Yes X Date 7/27/92 No _____

Manufacturer Mylars Type Subm

Location in well

Capacity 10 gpm. Depth of setting 30 ft

5. Well top sealed? Yes X No _____ Type Williams Cap

6. Pitless adapter installed? Yes X No _____

Manufacturer Williams Model No. B50AC

How attached to casing? Locknut

7. Well disinfected? Yes X No _____

8. Pump and equipment disinfected Yes X No _____

IMPORTANT NOTICE

This State Agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Public Act 85-0863. Disclosure of this information is mandatory. This form has been approved by the Forms Management Center.

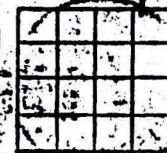
PRESS FIRMLY WITH BLACK PEN OR TYPE

Do Not Use Felt Pen

IL482-0126

GEOLOGICAL AND WATER SURVEYS WELL RECORD

9. Driller Marvin R. Nice License No. 10200246
10. Well Site Address 6103 Precinct, Union
11. Property Owner Thomas Powers Well No. _____
12. Permit No. E4843 Date Issued 7/24/92
13. Location: _____ County McHenry
Sec. 2
Twp. 43N
Rge. 6E



14. Water from Gravel at depth 5 ft

15. Casing and Liner Pipe		to <u>70</u> ft	
Diam. (in)	Kind and Weight	From (ft)	To (ft)
<u>5</u>	<u>Plastic Pipe</u>	<u>0</u>	<u>65</u>
	<u>Schedule 40</u>		

Show location in section plat

16. Screen: Diam. 5 in, Length 100 in, Slot Size 20

17. Size hole below casing 5 in. 18. Ground Elev. _____ ft msl.

19. Static level 10 ft below casing top which is 1 ft. above ground level. Pumping level 20 ft, pumping gpm for 4 hours.

20. Earth Materials Passed Through	Depth of Top	Depth of Bottom
<u>Top Soil</u>	<u>2</u>	<u>2</u>
<u>Clay</u>	<u>3</u>	<u>5</u>
<u>Gravel</u>	<u>65</u>	<u>70</u>

Continue on separate sheet if necessary.

Signed Marvin R. Nice Date 7/30/92

White Copy: Copies:
 Ill. Dep. of Public Health
 Yellow Copy: Well Contractor
 Golden Copy: Well Owner

Well Construction Report

THIS FORM MUST BE COMPLETED WITHIN 30 DAYS
 OF WELL COMPLETION AND SENT TO
 THE ILLINOIS DEPARTMENT OF PUBLIC HEALTH
 DIVISION OF ENVIRONMENTAL HEALTH
 525 WEST JEFFERSON STREET
 SPRINGFIELD, ILLINOIS 62761

GEOLOGICAL AND WATER SURVEYS WELL RECORD

9. Driller LARRY KELLER License No. 012-00721
 10. Well Site Address 10110 STACY LN. UNION IL
 11. Property Owner RICHARD L. LEBY Well No. _____
 12. Permit No. E-2937 Date Issued 10-28-91
 13. Location: County Mc HENRY
 Sec. 26
 Twp. 43N
 Rge. 1E

1. Type of Well

a. Bored _____ Hole Diam. _____ in. Depth _____ ft
 Buried Slab: Yes _____ No _____
 b. Driven _____ Drive Pipe Diam. _____ in. Depth _____ ft
 c. Drilled ☒ Finished in Drift ☒ In Rock _____
 d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
DRILL		
SLEERY	111	C
CABLE TOOL		

2. Well furnishes water for human consumption? Yes ☒ No _____
 3. Date well drilled 2-7-92
 4. Permanent pump installed? Yes ☒ Date 2-10-92 No _____
 Manufacturer DELTA Type Subc
 Location IN WELL
 Capacity 12 gpm. Depth of setting 60' ft.
 5. Well top sealed? Yes ☒ No _____ Type Williams
 6. Pitless adapter installed? Yes ☒ No _____
 Manufacturer Williams Model No. B50ACU
 How attached to casing? Bolt THREW
 7. Well disinfected? Yes ☒ No _____
 8. Pump and equipment disinfected Yes ☒ No _____

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 that is necessary to accomplish the statutory purpose as
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 the Forms Management Center.

PRESS FIRMLY WITH BLACK PEN OR TYPE
 Do Not Use Felt Pen

IL482-0126

14. Water from SAND at depth 191 ft
 15. Casing and Liner Pipe to _____ ft Show location
 Diam. (in) Kind and Weight From (ft) To (ft) in section
 plat

5	15.00 LB Steel	0	191

16. Screen: Diam. _____ in, Length _____ in, Slot Size _____
 17. Size hole below casing _____ in. 18. Ground Elev. _____ ft msl.
 19. Static level 26 ft below casing top which is 1 ft. above
 ground level. Pumping level 32 ft, pumping 8 gpm for 12 hours.

20. Earth Materials Passed Through	Depth of Top	Depth of Bottom
Top Soil	0	5
SAND & GRAVEL	5	12
BROWN CLAY - Stony	12	96
Light SAND - WATER GROUND NOT CLEAR	96	105
GRAY CLAY	105	185
TAN SAND	185	191

Continue on separate sheet if necessary.

Signed Larry Keller Date 2-11-92

White & Copies:
Will County Health Dept
Yellow Copy: Well Contractor
Golden Copy: Well Owner

Well Construction Report

F-0427

THIS FORM MUST BE COMPLETED WITHIN 30 DAYS

Your application must be submitted to the appropriate office depending on which township the well is to be located. See listing below.

Will County Health Dept.
Environmental Health
501 Ella Avenue
Joliet, IL 60433
(815) 727-8840

Will County Health Dept.
Environmental Health
342 N. Independence
Romeoville, IL 60441
(815) 886-1550
(312) 739-7971

Will County Health Dept.
Environmental Health
800 University Park
University Park, IL 60466
(815) 727-8803
(312) 534-0800

Townships
Channahon New Lenox
Custer Reed
Florence Troy
Jackson Wesley
Joliet Wilmington
Manhattan Wilton

Townships
Bolingbrook
DuPage
Homer
Lockport
Plainfield
Wheatland

Townships
Crete
Frankfort
Green Garden
Monee
Peotone
Washington
Will

1. Type of Well

- a. Bored _____ Hole Diam. _____ in. Depth _____ ft
Buried Slab: Yes _____ No _____
b. Driven _____ Drive Pipe Diam. _____ in. Depth _____ ft
c. Drilled ☒ Finished in Drift _____ In Rock ☒

d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
None		

2. Well furnishes water for human consumption? Yes ☒ No _____

3. Date well drilled 10-30-90

4. Permanent pump installed? Yes ☒ Date 10-31-90 No _____

Manufacturer Delta Type Self Imp.

Location _____

Capacity 12 gpm. Depth of setting 200 ft.

5. Well top sealed? Yes ☒ No _____ Type Wellhead

6. Pitless adapter installed? Yes ☒ No _____

Manufacturer Wellhead Model No. _____

How attached to casing? Clamp

7. Well disinfected? Yes ☒ No _____

8. Pump and equipment disinfected Yes ☒ No _____

GEOLOGICAL AND WATER SURVEYS WELL RECORD

9. Driller Tracy Thompson License No. 02-003078

10. Well Site Address Suburban Rd., Joliet, IL

11. Property Owner B. J. Miller Well No. _____

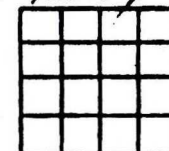
12. Permit No. _____ Date Issued _____

13. A. Tax # _____

B. Location: Sec. 8

Twp. 42N

Rge. 1E



Show location
in section
plat

14. Water from _____ at depth _____ ft

15. Casing and Liner Pipe _____ to _____ ft

Diam. (in)	Kind and Weight	From (ft)	To (ft)
5"	Black Steel	2' above	16'
		Crude	

16. Screen: Diam. _____ in. Length _____ in. Slot Size _____

17. Size hole below casing 5 in. 18. Ground Elev. _____ ft msl.

19. Static level 120 ft below casing top which is 1 ft. above ground level. Pumping level 102 ft, pumping gpm for _____ hours.

20. Earth Materials Passed Through	Depth of Top	Depth of Bottom
Clay	0'	23'
1/2" gravel	23'	50'
Clay	50'	160'
1/2" gravel	160'	220'

Continue on separate sheet if necessary.

Signed Ray Thompson Date 10-30-90

White Copy: Copies:
 Ill. Dept. of Public Health
 Yellow Copy: Well Contractor
 Golden Copy: Well Owner

Well Construction Report

THIS FORM MUST BE COMPLETED WITHIN 30 DAYS
 OF WELL COMPLETION AND SENT TO
 THE ILLINOIS DEPARTMENT OF PUBLIC HEALTH
 DIVISION OF ENVIRONMENTAL HEALTH
 525 WEST JEFFERSON STREET
 SPRINGFIELD, ILLINOIS 62761

1. Type of Well

a. Bored _____ Hole Diam. 5 in. Depth 160 ft

Buried Slab: Yes _____ No _____

b. Driven _____ Drive Pipe Diam. _____ in. Depth _____ ft

c. Drilled X Finished in Drift _____ In Rock X

d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
Cuttings	0	110

2. Well furnishes water for human consumption? Yes X No _____

3. Date well drilled 9/16/91

4. Permanent pump installed? Yes X Date 9/27/91 No _____

Manufacturer Delta Type Subm

Location in well

Capacity 15 gpm. Depth of setting 60 ft.

5. Well top sealed? Yes X No _____ Type Williams Cap

6. Pitless adapter installed? Yes X No _____

Manufacturer Williams Model No. B50AC

How attached to casing? Locknut

7. Well disinfected? Yes X No _____

8. Pump and equipment disinfected Yes X No _____

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PRESS FIRMLY WITH BLACK PEN OR TYPE

, Do Not Use Felt Pen

IL482-0126

GEOLOGICAL AND WATER SURVEYS WELL RECORD

9. Driller Marvin R. Nice License No. 102 00245

10. Well Site Address 6404 Dunham Road

11. Property Owner Peter Bychowski Well No. _____

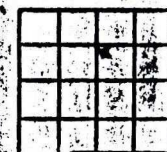
12. Permit No. E2789 Date Issued 9/12/91

13. Location: _____ County McHenry

Sec. 5

Twp. 43N

Rge. 6E



14. Water from Limestone at depth 110 ft

15. Casing and Liner Pipe to 160 ft

Diam.(in)	Kind and Weight	From (ft)	To (ft)	Show location in section plat
5	Schedule 40 Plastic	0	89	
5	Black Steel 15 lbs per ft.	89	110	

16. Screen: Diam. _____ in, Length _____ in, Slot Size _____

17. Size hole below casing 5 in. 18. Ground Elev. _____ ft msl.

19. Static level 20 ft below casing top which is 1 ft. above ground level. Pumping level 30 ft, pumping gpm for 4 hours.

20. Earth Materials Passed Through	Depth of Top	Depth of Bottom
Top soil	0	2
Clay	2	10
Gravel	10	20
Clay	20	110
Shale & Limestone	110	160

Continue on separate sheet if necessary.

Signed Marvin R. Nice Date 10/3/91

White Copy: Copies:
In Dept. of Public Health
Yellow Copy: Well Contractor
Golden Copy: Well Owner

Well Construction Report

THIS FORM MUST BE COMPLETED WITHIN 30 DAYS
OF WELL COMPLETION AND SENT TO
THE ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 WEST JEFFERSON STREET
SPRINGFIELD, ILLINOIS 62761

GEOLOGICAL AND WATER SURVEYS WELL RECORD

9. Driller Marvin R. Nies License No. 102-00241
10. Well Site Address Fair Lane, Union
11. Property Owner Terrance Hoelt Well No. _____
12. Permit No. 011051 Date Issued 4/24/90
13. Location: _____ County McHenry
Sec. 23
Twp. 43N
Rge. 6E

1. Type of Well

a. Bored _____ Hole Diam. 5 in. Depth 220 ft

Buried Slab: Yes _____ No _____

b. Driven _____ Drive Pipe Diam. _____ in. Depth _____ ft

c. Drilled X Finished in Drift _____ In Rock X

d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
Cuttings	0	210

2. Well furnishes water for human consumption? Yes X No _____

3. Date well drilled 6/4/90

4. Permanent pump installed? Yes X Date 6/12/90 No _____

Manufacturer Aermotor Type Subm.

Location in well

Capacity 15 gpm. Depth of setting 160 ft.

5. Well top sealed? Yes X No _____ Type Williams Cap

6. Pitless adapter installed? Yes _____ No _____

Manufacturer Williams Model No. B50AC

How attached to casing? locknut

7. Well disinfected? Yes X No _____

8. Pump and equipment disinfected Yes X No _____

14. Water from Limestone at depth 210 ft.

15. Casing and Liner Pipe		to <u>220</u> ft	
Diam. (in)	Kind and Weight	From (ft)	To (ft)
<u>5</u>	<u>Black Steel</u>	<u>0</u>	<u>210</u>
	<u>15 lbs. Per Ft</u>		

Show location
in section
plat

16. Screen: Diam. _____ in, Length _____ in, Slot Size _____

17. Size hole below casing 5 in. 18. Ground Elev. _____ ft msl.

19. Static level 40 ft below casing top which is 1 ft. above
ground level. Pumping level 50 ft, pumping gpm for 4 hours.

20. Earth Materials Passed Through	Depth of Top	Depth of Bottom
<u>Top Soil</u>	<u>2</u>	<u>2</u>
<u>clay</u>	<u>38</u>	<u>40</u>
<u>Sand and Gravel</u>	<u>20</u>	<u>60</u>
<u>clay</u>	<u>150</u>	<u>210</u>
<u>Limestone</u>	<u>10</u>	<u>220</u>

Continue on separate sheet if necessary.

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that is necessary to accomplish the statutory purpose as
outlined under Public Act 85-0863. Disclosure of this
information is mandatory. This form has been approved by
the Forms Management Center.

PRESS FIRMLY WITH BLACK PEN OR TYPE

Do Not Use Felt Pen

Signed Marvin R Nies Date 6/26/90

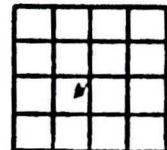
Well Construction Report

THIS FORM MUST BE COMPLETED WITHIN 30 DAYS
OF WELL COMPLETION AND SENT TO
THE ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 WEST JEFFERSON STREET
SPRINGFIELD, ILLINOIS 62761

GEOLOGICAL AND WATER SURVEYS WELL RECORD

9. Driller Marvin R. Nice License No. 102 002458
10. Well Site Address Dunham Road, Union
11. Property Owner Mark Seemiller Well No. _____
12. Permit No. 017052 Date Issued 03/05/90
13. Location: County McHenry

Sec. 5
Twp. 43N
Rge 6E



Show location
in section
plat

1. Type of Well

- a. Bored _____ Hole Diam. 5 in. Depth 120 ft
Buried Slab: Yes _____ No _____
b. Driven _____ Drive Pipe Diam. _____ in. Depth _____ ft
c. Drilled X Finished in Drift _____ In Rock X

d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
Cuttings	0	110

2. Well furnishes water for human consumption? Yes X No _____
3. Date well drilled 07/14/90
4. Permanent pump installed? Yes X Date 07/14/90 No _____
Manufacturer Aermotor Type Subm.
Location in Well
Capacity 10 gpm. Depth of setting 40 ft.
5. Well top sealed? Yes X No _____ Type Williams Cap
6. Pitless adapter installed? Yes X No _____
Manufacturer Williams Model No. B50AC
How attached to casing? Locknut
7. Well disinfected? Yes X No _____
8. Pump and equipment disinfected Yes X No _____

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that is necessary to accomplish the statutory purpose as
outlined under Public Act 85-0863. Disclosure of this
information is mandatory. This form has been approved by
the Forms Management Center.

PRESS FIRMLY WITH BLACK PEN OR TYPE
Do Not Use Felt Pen

14. Water from Limestone at depth 110 ft
to 120 ft

15. Casing and Liner Pipe		to <u>120</u> ft	
Diam.(in)	Kind and Weight	From (ft)	To (ft)
5	Black Steel	0	110
	15 Lbs. per Ft.		

16. Screen: Diam. _____ in, Length _____ in, Slot Size _____
17. Size hole below casing 5 in. 18. Ground Elev. _____ ft msl.
19. Static level 5 ft below casing top which is 1 ft. above
ground level. Pumping level 15 ft, pumping gpm for 4 hours.

20. Earth Materials Passed Through	Depth of Top	Depth of Bottom
Top Soil	2	2
Clay	108	110
Limestone	10	120

Continue on separate sheet if necessary.

Signed Marvin R. Nice Date 08/07/90

White Copy: Copies:
Ill. Dept. of Public Health
Yellow Copy: Well Contractor
Golden Copy: Well Owner

Well Construction Report

THIS FORM MUST BE COMPLETED WITHIN 30 DAYS
OF WELL COMPLETION AND SENT TO
THE ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 WEST JEFFERSON STREET
SPRINGFIELD, ILLINOIS 62761

1. Type of Well

- a. Bored _____ Hole Diam. 5 in. Depth 180 ft
Buried Slab: Yes _____ No _____
b. Driven _____ Drive Pipe Diam. _____ in. Depth _____ ft
c. Drilled X Finished in Drift _____ In Rock X

(KIND)	FROM (Ft.)	TO (Ft.)
Grout:		
Cuttings	0	174

2. Well furnishes water for human consumption? Yes X No _____
3. Date well drilled 5/30/90
4. Permanent pump installed? Yes _____ Date _____ No X
Manufacturer _____ Type _____
Location _____
Capacity _____ gpm. Depth of setting _____ ft.
5. Well top sealed? Yes _____ No X Type _____
6. Pitless adapter installed? Yes _____ No X
Manufacturer _____ Model No. _____
How attached to casing? _____
7. Well disinfected? Yes X No _____
8. Pump and equipment disinfected Yes _____ No X

IMPORTANT NOTICE

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PRESS FIRMLY WITH BLACK PEN OR TYPE

Do Not Use Felt Pen

IL482-0126

GEOLOGICAL AND WATER SURVEYS WELL RECORD

9. Driller Mark E. Nicol License No. 102-00320
10. Well Site Address Diarengo Rd., Union
11. Property Owner Nat'l Bank & Trust Well No. _____
12. Permit No. 019110 Date Issued 5/11/90
13. Location: _____ County McHenry
Sec. 25 Twp. 43N Rge. 10E

14. Water from Limestone at depth 174 ft

15. Casing and Liner Pipe		to <u>180</u> ft	
Diam. (in)	Kind and Weight	From (ft)	To (ft)
<u>5</u>	<u>Black Steel</u>	<u>0</u>	<u>174</u>
	<u>15 lbs. Per Ft.</u>		

Show location
in section
plat

16. Screen: Diam. _____ in, Length _____ in, Slot Size _____
17. Size hole below casing 5 in. 18. Ground Elev. _____ ft msl.
19. Static level 10 ft below casing top which is 1 ft. above
ground level. Pumping level 20 ft, pumping gpm for 4 hours.

20. Earth Materials Passed Through	Depth of Top	Depth of Bottom
Top Soil	<u>2</u>	<u>2</u>
Clay	<u>143</u>	<u>145</u>
Gravel	<u>13</u>	<u>158</u>
Clay	<u>16</u>	<u>174</u>
Limestone	<u>0</u>	<u>180</u>

Continue on separate sheet if necessary.

Signed _____

Date 5/30/90

White Copy -
Ill. Dept. of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INSTRUCTIONS TO DRILLERS

FILL IN ALL PERTINENT INFORMATION REQUESTED AND MAIL ORIGINAL TO STATE
DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST
JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER
SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

ILLINOIS DEPARTMENT OF PUBLIC HEALTH WELL CONSTRUCTION REPORT

1. Type of Well

- a. Dug ☐ Bored ☐ Hole Diam. 12 in. Depth 260 ft.
Curb material ☐ Buried Slab: Yes ☐ No ☐
b. Driven ☐ Drive Pipe Diam. 12 in. Depth 260 ft.
c. Drilled ☐ Finished in Drift ☐ In Rock ☐
Tubular ☐ Gravel Packed ☐
d. Grout:

(KIND)	FROM (FT.)	TO (FT.)
Cutting	0	216

2. Distance to Nearest:

Building 10 Ft. Seepage Tile Field ☐
Cess Pool ☐ Sewer (non Cast iron) ☐
Privy ☐ Sewer (Cast iron) ☐
Septic Tank 20 Barnyard ☐
Leaching Pit ☐ Manure Pile ☐

3. Well furnishes water for human consumption? Yes ☐ No ☐

4. Date well completed 10/20/82

5. Permanent Pump Installed? Yes ☐ Date 10/20/82 No ☐

Manufacturer Red Lake Type 110 Location in well
Capacity 10 gpm. Depth of Setting 260 Ft.

6. Well Top Sealed? Yes ☐ No ☐ Type Illinois 600

7. Pitless Adapter Installed? Yes ☐ No ☐

Manufacturer Illinois Model Number 7010
How attached to casing? Locknut

8. Well Disinfected? Yes ☐ No ☐

9. Pump and Equipment Disinfected? Yes ☐ No ☐

10. Pressure Tank Size 40 gal. Type 110

Location out

11. Water Sample Submitted? Yes ☐ No ☐

REMARKS:

RECEIVED

MAR 15 1983

McHENRY COUNTY
DEPT. OF HEALTH

GEOLOGICAL AND WATER SURVEYS WELL RECORD

10. Property owner Ray W. H. Henson Well No.

Address 1001 W. 2nd St. Union, Ill

Driller Kevin Rice License No. 102 DEW-10

11. Permit No. 103721 Date 11/22/82

12. Water from limestone Formation

at depth 216 to 260 ft. Sec. 6

14. Screen: Diam. 12 in. Twp. 13N

Length: ft. Slot Rge.

Elev.

15. Casing and Liner Pipe

Diam. (In.)	Kind and Weight	From (Ft.)	To (Ft.)
<u>12</u>	<u>12 lb steel</u>	<u>0</u>	<u>216</u>
	<u>12 lb galv steel</u>		

SHOW
LOCATION IN
SECTION PLAT

16. Size Hole below casing: 5 in.

17. Static level 60 ft. below casing top which is 1 ft.

above ground level. Pumping level 10 ft. when pumping at 10
gpm for hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
<u>Top Soil</u>	<u>4</u>	<u>4</u>
<u>clay</u>	<u>212</u>	<u>216</u>
<u>limestone</u>	<u>44</u>	<u>260</u>

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED man DATE 1/26/83

White Copy -
Ill. Dep. of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INSTRUCTIONS TO DRILLERS

FILL IN ALL PERTINENT INFORMATION REQUESTED AND MAIL ORIGINAL TO STATE
DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST
JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER
SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

ILLINOIS DEPARTMENT OF PUBLIC HEALTH WELL CONSTRUCTION REPORT

1. Type of Well

- a. Dug . Bored . Hole Diam. 5 in. Depth 172 ft.
Curb material . Buried Slab: Yes No
- b. Driven . Drive Pipe Diam. in. Depth ft.
- c. Drilled X. Finished in Drift . In Rock X.
Tubular . Gravel Packed .
- d. Grout:

(KIND)	FROM (Ft.)	TO (Ft.)
Cuttings	0	120

2. Distance to Nearest:

Building 10 Ft. Seepage Tile Field
Cess Pool Sewer (non Cast iron)
Privy Sewer (Cast iron)
Septic Tank 72 Barnyard
Leaching Pit Manure Pile

3. Well furnishes water for human consumption? Yes X No

4. Date well completed 10/15/81

5. Permanent Pump Installed? Yes X Date 10/15/81 No

Manufacturer Red Jacket Type Subm Location in well
Capacity 10 gpm. Depth of Setting 84 Ft.

6. Well Top Sealed? Yes X No Type Williams Cap

7. Pitless Adapter Installed? Yes X No

Manufacturer Williams Model Number B50AC

How attached to casing? Locknut

8. Well Disinfected? Yes X No

9. Pump and Equipment Disinfected? Yes X No

10. Pressure Tank Size 120 gal. Type Galv.

Location Basement

11. Water Sample Submitted? Yes No X

REMARKS:

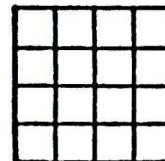
RECEIVED

DEC 28 1981

McHENRY COUNTY
DEPT. OF HEALTH

GEOLOGICAL AND WATER SURVEYS WELL RECORD

10. Property owner Eugene Shaw Well No.
Address R.R. 1 Union Rd Union, Illinois
Driller Marvin Nice License No. 102 002458
11. Permit No. 101680 Date 10/8/81
12. Water from Limestone Formation at depth 121 to 172 ft.
13. County McHenry Sec. 5
Twp. A3N
Rge. 6E
Elev.



SHOW
LOCATION IN
SECTION PLAT

15. Casing and Liner Pipe

Diam. (in.)	Kind and Weight	From (Ft.)	To (Ft.)
5"	Black steel	0	120
	15 lbs per ft		

16. Size Hole below casing: 5 in.

17. Static level 20 ft. below casing top which is 1 ft.
above ground level. Pumping level 20 ft. when pumping at 10
gpm for 4 hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
Top Soil	2	2
Gray Clay	116	120
Limestone w/ shale	20	150
Limestone	22	172

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED Marvin Nice DATE 10/30/81

White Copy -
Ill. Dept. of Public Health
Yellow Copy - Well Contractor
Blue Copy - Well Owner

INSTRUCTIONS TO DRILLERS

FILL IN ALL PERTINENT INFORMATION REQUESTED AND MAIL ORIGINAL TO STATE DEPARTMENT OF PUBLIC HEALTH, CONSUMER HEALTH PROTECTION, 535 WEST JEFFERSON, SPRINGFIELD, ILLINOIS, 62761. DO NOT DETACH GEOLOGICAL/WATER SURVEYS SECTION. BE SURE TO PROVIDE PROPER WELL LOCATION.

RECEIVED

DEC 30 1982

McHENRY COUNTY
DEPT. OF HEALTH

ILLINOIS DEPARTMENT OF PUBLIC HEALTH WELL CONSTRUCTION REPORT

GEOLOGICAL AND WATER SURVEYS WELL RECORD

1. Type of Well

- a. Dug ☐ Bored ☐ Hole Diam. 5 in. Depth 180 ft.
Curb material ☐ Buried Slab: Yes ☐ No ☐
b. Driven ☐ Drive Pipe Diam. ☐ in. Depth ☐ ft.
c. Drilled ☒ Finished in Drift ☐ In Rock ☒
Tubular ☐ Gravel Packed ☐
d. Grout:

(KIND)	FROM (FT.)	TO (FT.)

2. Distance to Nearest:

Building ☐ Ft. Seepage Tile Field 80'
Cess Pool ☐ Sewer (non Cast iron) ☐
Privy ☐ Sewer (Cast iron) ☐
Septic Tank 55' Barnyard ☐
Leaching Pit ☐ Manure Pile ☐

3. Well furnishes water for human consumption? Yes ☒ No ☐

4. Date well completed 9/1/82

* 5. Permanent Pump Installed? Yes ☒ Date ☐ No ☐

Manufacturer ☐ Type ☐ Location ☐
Capacity ☐ gpm. Depth of Setting ☐ Ft.

6. Well Top Sealed? Yes ☐ No ☐ Type ☐

7. Pitless Adapter Installed? Yes ☐ No ☐

Manufacturer ☐ Model Number ☐
How attached to casing? ☐

8. Well Disinfected? Yes ☒ No ☐

9. Pump and Equipment Disinfected? Yes ☐ No ☐

10. Pressure Tank Size ☐ gal. Type ☐

Location ☐

11. Water Sample Submitted? Yes ☒ No ☐

REMARKS:

* Pump installed by another contractor

10. Property owner AL Frohling Well No. ☐

Address 11708 EAST CORAL UNION

Driller R. SNETTER License No. 92-227

11. Permit No. 104205 Date 7/21/82

12. Water from Limestone 13. County Mc Henry

Formation ☐
at depth ☐ to ☐ ft. Sec. 10

14. Screen: Diam. ☐ in. Twp. 43N

Length: ☐ ft. Slot ☐ Rge. 6E

Elev. ☐

15. Casing and Liner Pipe

Diam. (in.)	Kind and Weight	From (Ft.)	To (Ft.)
<u>5</u>	<u>Steel 15#</u>	<u>0</u>	<u>124</u>

SHOW
LOCATION IN
SECTION PLAT

16. Size Hole below casing: 5 in.

17. Static level 90 ft. below casing top which is 1 ft.

above ground level. Pumping level 120 ft. when pumping at 12 gpm for 3 hours.

18. FORMATIONS PASSED THROUGH	THICKNESS	DEPTH OF BOTTOM
<u>BROWN CLAY</u>	<u>0</u>	<u>20</u>
<u>CLAY</u>	<u>20</u>	<u>70</u>
<u>SAND + GRAVEL</u>	<u>70</u>	<u>100</u>
<u>GRAVEL + CLAY</u>	<u>100</u>	<u>120</u>
<u>SAND + GRAVEL</u>	<u>120</u>	<u>124</u>
<u>Limestone</u>	<u>124</u>	<u>180</u>

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

SIGNED Richard Snetter DATE 10/30/82